|  | KOIII LIGIA  |  | United<br>n Distric  |   |   |                                      |                                     |   |  |   | Vol   | untary   | Petition                                  |
|--|--|--|--|---|---|--------------------------------------|-------------------------------------|---|--|---|---|--|---|
|  | *  | ividual, ente                                | er Last, First<br><b>a</b>   | , Middle):                                    |   |                                      | Name                                | of Joint De   | ebtor (Spouse  | e) (Last, First   | , Middle):  |  |   |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):  AKA Tina Carpenter |  |  |  |   |   | All O                                | ther Names<br>de married,           | used by the maiden, and   | Joint Debtor<br>trade names  | in the last 8<br>):   | 3 years   |  |   |
| Last four dig  | one, state all)  |  | vidual-Taxp  | ayer I.D. (                                   | ITIN) No./  | Complete E                           |                                     | our digits o  |  | r Individual-   | Taxpayer I.   | D. (ITIN) No   | o./Complete EIN                           |
| Street Addre   | ess of Debto   | *  | Street, City,  | and State)                                    | _   | ZIP Code                             |                                     | Address of  | Joint Debtor   | r (No. and St   | reet, City, a   | nd State):   | ZIP Code                                  |
| County of R  | esidence or  | of the Princ                                 | cipal Place o  | f Business                                    |   | 27332                                | Coun                                | ty of Reside  | ence or of the   | Principal Pl  | ace of Busin  | ness:  | <u> </u>                                  |
| Harnett Mailing Add  | lress of Deb   | otor (if diffe                               | rent from str  | eet addres                                    | ss):  |                                      | Maili                               | ng Address  | of Joint Deb   | tor (if differe   | nt from stre  | et address):   |   |
|  |  |  |  |   | Г   | ZIP Code                             | :                                   |   |  |   |   |  | ZIP Code                                  |
| Location of (if different  | Principal A from street  | ssets of Bus<br>address abo                  | iness Debtorve):   | r   | ,   |                                      | •                                   |   |  |   |   |  |   |
| ☐ Corporat ☐ Partnersl ☐ Other (If   | (Form of C<br>(Check<br>al (includes<br>ibit D on pa<br>tion (include<br>hip | ge 2 of this<br>es LLC and                   | form. LLP)  pove entities,   | □ Sing in 1 □ Rail □ Stoo □ Con □ Clea □ Othe | Ith Care But let Asset Rot 1 U.S.C. § road exbroker modity Bruring Bank er Tax-Exe (Check box tor is a tax- | eal Estate as<br>101 (51B)           | e)                                  | defined<br>"incurr  | er 7 er 9 er 11 er 12 er 13 are primarily cd in 11 U.S.C. ared by an indiv | Of  Natur (Chec consumer debts. § 101(8) as idual primarily   | hapter 15 P f a Foreign I hapter 15 P f a Foreign I hapter 15 P f a Foreign I e of Debts k one box) | one box) etition for R Main Procee etition for R Nonmain Pro | ecognition<br>ding<br>ecognition          |
| attach signis unable  Filing Fe  | ee to be paid<br>gned applice<br>to pay fee<br>ee waiver re                  | ched d in installmation for the except in in | ee (Check of<br>tents (applicate court's constallments. I<br>plicable to ce court's cons | ne box)  able to indisideration Rule 1006     | lividuals on<br>certifying t<br>(b). See Offi   | hat the debicial Form 3A only). Must | Check                               | c one box: Debtor is Debtor is C if: Debtor's a to insiders C all applica A plan is Acceptant | a small busir<br>not a small b<br>aggregate not<br>s or affiliates         | Chapter 11 ness debtor as pusiness debtor ncontingent 1 ) are less than with this petiti nn were solici | Debtors s defined in or as define liquidated d in \$2,190,00 ion.                                   | d in 11 U.S. ebts (exclud 0.                                 | C. § 101(51D).  ing debts owed  e or more |
| Debtor e   | estimates that<br>estimates that   | at funds will<br>at, after any               | ation<br>be available<br>exempt prop<br>for distribut                                    | erty is ex                                    | cluded and  | administrat                          |                                     |   |  |   |   | FOR COURT  | <i>'</i>                                  |
| Estimated N  1- 49   | 50-<br>99  | reditors  100- 199                           | 200-<br>999  | 1,000-<br>5,000                               | 5,001-<br>10,000  | 10,001-<br>25,000                    | 25,001-<br>50,000                   | 50,001-<br>100,000  | OVER 100,000   |   |   |  |   |
| Estimated A  \$0 to \$50,000   | \$50,001 to<br>\$100,000   | \$100,001 to<br>\$500,000                    | \$500,001<br>to \$1<br>million   | \$1,000,001<br>to \$10<br>million             | \$10,000,001<br>to \$50<br>million  | \$50,000,001<br>to \$100<br>million  | \$100,000,00<br>to \$500<br>million | \$500,000,001<br>to \$1 billion   |  |   |   |  |   |
| Estimated Li  \$0 to \$50,000  | \$50,001 to<br>\$100,000   | \$100,001 to<br>\$500,000                    | \$500,001<br>to \$1  | \$1,000,001<br>to \$10<br>million             | \$10,000,001 to \$50 million  | \$50,000,001 to \$100 million        | \$100,000,00<br>to \$500<br>million | \$500,000,001 to \$1 billion  |  |   |   |  |   |

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| B1 (Official For            | 11 1)(1/08)  |  | rage 2                              |  |  |  |  |
|-----------------------------|--|--|-------------------------------------|--|--|--|--|
| Voluntary                   | y Petition   | Name of Debtor(s):  Carpenter, Christina Maria   |                                     |  |  |  |  |
| (This page mu               | st be completed and filed in every case)   |  |                                     |  |  |  |  |
| T                           | All Prior Bankruptcy Cases Filed Within Last   |  |                                     |  |  |  |  |
| Location<br>Where Filed:    | - None -   | Case Number:   | Date Filed:                         |  |  |  |  |
| Location<br>Where Filed:    |  | Case Number:   | Date Filed:                         |  |  |  |  |
| Pei                         | nding Bankruptcy Case Filed by any Spouse, Partner, or   | Affiliate of this Debtor (If more than   | an one, attach additional sheet)    |  |  |  |  |
| Name of Debte<br>- None -   | or:  | Case Number:   | Date Filed:                         |  |  |  |  |
| District:                   |  | Relationship:  | Judge:                              |  |  |  |  |
|                             | Exhibit A  |  | Exhibit B                           |  |  |  |  |
| forms 10K and pursuant to S | leted if debtor is required to file periodic reports (e.g., and 10Q) with the Securities and Exchange Commission Section 13 or 15(d) of the Securities Exchange Act of 1934 sting relief under chapter 11.)  | (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). |                                     |  |  |  |  |
| ☐ Exhibit.                  | A is attached and made a part of this petition.  | X /s/ for John T. Orcutt   | August 28, 2008                     |  |  |  |  |
|                             |  | Signature of Attorney for Debtor( for John T. Orcutt #1021   | ` '                                 |  |  |  |  |
|                             | Exh  | ibit C   |                                     |  |  |  |  |
| Does the debto              | r own or have possession of any property that poses or is alleged to   | pose a threat of imminent and identifiab   | le harm to public health or safety? |  |  |  |  |
| ☐ Yes, and ☐ No.            | Exhibit C is attached and made a part of this petition.  |  |                                     |  |  |  |  |
|                             | Exh  | ibit D   |                                     |  |  |  |  |
| _                           | eted by every individual debtor. If a joint petition is filed, ea<br>D completed and signed by the debtor is attached and made and<br>the petition:  |  | a separate Exhibit D.)              |  |  |  |  |
| ☐ Exhibit 1                 | D also completed and signed by the joint debtor is attached a  | and made a part of this petition.  |                                     |  |  |  |  |
|                             | Information Regardin   | =  |                                     |  |  |  |  |
| •                           | (Check any ap Debtor has been domiciled or has had a residence, princip days immediately preceding the date of this petition or for  | al place of business, or principal ass   | ets in this District for 180        |  |  |  |  |
|                             |  |  |                                     |  |  |  |  |
|                             |  |  |                                     |  |  |  |  |
|                             | Certification by a Debtor Who Reside<br>(Check all app   |  | erty                                |  |  |  |  |
|                             | Landlord has a judgment against the debtor for possession  | of debtor's residence. (If box checked   | l, complete the following.)         |  |  |  |  |
|                             | (Name of landlord that obtained judgment)  |  |                                     |  |  |  |  |
|                             |  |  |                                     |  |  |  |  |
| _                           | (Address of landlord)  |  | a 11.                               |  |  |  |  |
|                             | Debtor claims that under applicable nonbankruptcy law, the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the judgment for the entire monetary default that gave rise to the gav | for possession, after the judgment fo  | or possession was entered, and      |  |  |  |  |
|                             | Debtor has included in this petition the deposit with the coafter the filing of the petition.  | urt of any rent that would become d  | ue during the 30-day period         |  |  |  |  |
| -                           | ☐ Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).  |  |                                     |  |  |  |  |

B1 (Official Form 1)(1/08)

### **Voluntary Petition**

(This page must be completed and filed in every case)

### Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

#### X /s/ Christina Maria Carpenter

Signature of Debtor Christina Maria Carpenter

 $\mathbf{X}$ 

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

August 28, 2008

Date

### Signature of Attorney\*

#### X /s/ for John T. Orcutt

Signature of Attorney for Debtor(s)

#### for John T. Orcutt #10212

Printed Name of Attorney for Debtor(s)

#### The Law Offices of John T. Orcutt, PC

Firm Name

6616-203 Six Forks Road Raleigh, NC 27615

Address

### Email: postlegal@johnorcutt.com (919) 847-9750 Fax: (919) 847-3439

Telephone Number

August 28, 2008

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

#### Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Name of Debtor(s):

Carpenter, Christina Maria

#### Signatures

#### Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

### Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

| <b>T</b> |
|----------|
| v        |
|          |
| _        |

Date

Address

Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.

Official Form 1, Exhibit D (10/06)

## **United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)**

|       |                           |           | 1 /     |    |
|-------|---------------------------|-----------|---------|----|
| In re | Christina Maria Carpenter |           | Case No | ). |
|       |                           | Debtor(s) | Chapter | 13 |
|       |                           |           | _       |    |

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.] \_\_\_\_

If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.

### Official Form 1, Exh. D (10/06) - Cont.

| ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable            |
|---|
| statement.] [Must be accompanied by a motion for determination by the court.]                               |
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental           |
| deficiency so as to be incapable of realizing and making rational decisions with respect to financial       |
| responsibilities.);   |
| ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being               |
| unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or |
| through the Internet.);   |
| ☐ Active military duty in a military combat zone.   |
|   |

☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

| Signat | ure of Debtor:  | /s/ Christina Maria Carpenter |
|--------|-----------------|-------------------------------|
|        |                 | Christina Maria Carpenter     |
| Date:  | August 28, 2008 |                               |

B6 Summary (Official Form 6 - Summary) (12/07)

## **United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)**

| In re | Christina Maria Carpenter |        | Case No. |    |
|-------|---------------------------|--------|----------|----|
| -     | ·                         | Debtor |          |    |
|       |                           |        | Chapter  | 13 |

### **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF<br>SHEETS | ASSETS            | LIABILITIES | OTHER    |
|---|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property   | Yes                  | 1                | 137,500.00        |             |          |
| B - Personal Property   | Yes                  | 11               | 52,245.00         |             |          |
| C - Property Claimed as Exempt  | No                   | 0                |                   |             |          |
| D - Creditors Holding Secured Claims  | Yes                  | 2                |                   | 174,991.43  |          |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes                  | 3                |                   | 14,715.87   |          |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                           | Yes                  | 4                |                   | 20,064.62   |          |
| G - Executory Contracts and<br>Unexpired Leases                                 | Yes                  | 1                |                   |             |          |
| H - Codebtors   | Yes                  | 1                |                   |             |          |
| I - Current Income of Individual<br>Debtor(s)                                   | Yes                  | 1                |                   |             | 3,251.58 |
| J - Current Expenditures of Individual Debtor(s)                                | Yes                  | 2                |                   |             | 3,251.58 |
| Total Number of Sheets of ALL Schedu  | ıles                 | 26               |                   |             |          |
|   | T                    | otal Assets      | 189,745.00        |             |          |
|   |                      | 1                | Total Liabilities | 209,771.92  |          |

# **United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)**

| In re | Christina Maria Carpenter |        | Case No. |    |
|-------|---------------------------|--------|----------|----|
| -     | ·                         | Debtor |          |    |
|       |                           |        | Chapter  | 13 |

### STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability   | Amount    |
|---|-----------|
| Domestic Support Obligations (from Schedule E)  | 0.00      |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)  | 12,215.87 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00      |
| Student Loan Obligations (from Schedule F)  | 0.00      |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                | 0.00      |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)                           | 0.00      |
| TOTAL   | 12,215.87 |

#### State the following:

| Average Income (from Schedule I, Line 16)  | 3,251.58 |
|--|----------|
| Average Expenses (from Schedule J, Line 18)  | 3,251.58 |
| Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20) | 4,335.48 |

#### State the following:

| bute the following.  |           |           |
|--|-----------|-----------|
| Total from Schedule D, "UNSECURED PORTION, IF ANY" column                  |           | 17,746.03 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column             | 14,715.87 |           |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |           | 0.00      |
| 4. Total from Schedule F   |           | 20,064.62 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |           | 37,810.65 |

## UNITED STATES BANKRUPTCY COURT **EASTERN DISTRICT OF NORTH CAROLINA (NC EXEMPTIONS)**

### NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total Fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured

obligations.

### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

### **Chapter 12:** Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

**WARNING:** Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

### **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

| for John 1. Orcutt #10212                    | X /s/ for John 1. Orcutt                                | August 28, 2008 |
|--|---|-----------------|
| Printed Name of Attorney                     | Signature of Attorney                                   | Date            |
| Address:                                     |   |                 |
| 6616-203 Six Forks Road                      |   |                 |
| Raleigh, NC 27615                            |   |                 |
| (919) 847-9750                               |   |                 |
| I (We), the debtor(s), affirm that I (we) ha | Certificate of Debtor ve received and read this notice. |                 |
| Christina Maria Carpenter                    | X /s/ Christina Maria Carpenter                         | August 28, 2008 |
| Printed Name(s) of Debtor(s)                 | Signature of Debtor                                     | Date            |
| Case No. (if known)                          | X   |                 |
|  | Signature of Joint Debtor (if any)                      | Date            |

Case 08-05813-8-JRL Doc 1 Filed 08/28/08 Entered 08/28/08 11:01:12 Page 10 of 58

# **United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)**

| In re | e Christina Maria Carpenter  |   | Case No.   |  |
|-------|--|---|--|--|
| 111 1 |  | Debtor(s)   | Chapter  | 13   |
|       | DISCLOSURE OF COMPEN   | NSATION OF ATTOR  | RNEY FOR D   | EBTOR(S)   |
|       | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Ru compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation   | ng of the petition in bankruptcy  | y, or agreed to be pa  | aid to me, for services rendered or to                       |
|       | For legal services, I have agreed to accept  |   | \$   | 3,000.00   |
|       | Prior to the filing of this statement I have received.   |   | \$   | 500.00   |
|       | Balance Due  |   | \$   | 2,500.00   |
| 2.    | \$   |   |  |  |
| 3.    | The source of the compensation paid to me was:   |   |  |  |
|       | ■ Debtor □ Other (specify):  |   |  |  |
| 4.    | The source of compensation to be paid to me is:  |   |  |  |
|       | ■ Debtor □ Other (specify):  |   |  |  |
| 5.    | ■ I have not agreed to share the above-disclosed comp firm.  | ensation with any other person  | unless they are mo   | embers and associates of my law                              |
|       | ☐ I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the national copy of the agreement.  |   |  |  |
|       | In return for the above-disclosed fee, I have agreed to re a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, stat c. Representation of the debtor at the meeting of credite d. [Other provisions as needed]  Exemption planning, Means Test planni contract or required by Bankruptcy Cou | ering advice to the debtor in de<br>tement of affairs and plan which<br>ors and confirmation hearing, a<br>larg, and other items if spe | etermining whether<br>th may be required;<br>and any adjourned h | to file a petition in bankruptcy; nearings thereof;          |
| 7.    | By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any discany other adversary proceeding, and an Bankruptcy Court local rule.   | schareability actions, judio  | cial lien avoidan  |  |
|       | Fee also collected, where applicable, in each, Judgment Search: \$10 each, Cred Class Certification: Usually \$8 each, Us Class: \$10 per session, or paralegal typ  | lit Counseling Certification e of computers for Credit  | n: Usually \$34 pe<br>Counseling brie                            | er case, Financial Management<br>fing or Financial Managment |
|       |  | CERTIFICATION   |  |  |
|       | I certify that the foregoing is a complete statement of an bankruptcy proceeding.  | y agreement or arrangement fo   | or payment to me for   | r representation of the debtor(s) in                         |
| Date  |  | /s/ for John T. Or  | cutt   |  |
| Date  | riagaot 20, 2000   | for John T. Orcut   | tt #10212  |  |
|       |  | The Law Offices   |  | t, PC  |
|       |  | 6616-203 Six For<br>Raleigh, NC 2761  |  |  |
|       |  | (919) 847-9750 F  | Fax: (919) 847-34  | 39   |
|       |  | postlegal@johno   | rcutt.com  |  |

### Case 08-05813-8-JRL Doc 1 Filed 08/28/08 Entered 08/28/08 11:01:12 Page 11 of 58

B6A (Official Form 6A) (12/07)

| In re | Christina Maria Carpenter | Case No. |  |
|-------|---------------------------|----------|--|
| -     | <u>.</u>                  | ,        |  |
|       |                           | Debtor   |  |

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property  | Nature of Debtor's<br>Interest in Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in<br>Property, without<br>Deducting any Secured<br>Claim or Exemption | Amount of<br>Secured Claim |
|---|--|---|--|----------------------------|
| House & Lot:<br>105 Baytree Lane<br>Sanford, NC 27332<br>*INCLUDES ABOVE GROUND POOL* |  | -   | 137,500.00   | 107,845.40                 |
| Valuation Method (Sch. A & B) : FMV unless otherwise noted.                           |  | -   | 0.00   | 0.00                       |

Sub-Total > 137,500.00 (Total of this page)

Total > **137,500.00** 

**0** continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

B6B (Official Form 6B) (12/07)

| In re | Christina Maria Carpenter | Case No |  |
|-------|---------------------------|---------|--|
| _     |                           | Debtor  |  |

### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| Type of Property  | N O N Description and Location of Property E       | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property<br>without Deducting any<br>Secured Claim or Exemption |
|---|--|---|--|
| 1. Cash on hand   | Х  |   |  |
| 2. Checking, savings or other financial   | Bank of America (Checking)                         | -   | 0.00   |
| accounts, certificates of deposit, or<br>shares in banks, savings and loan,<br>thrift, building and loan, and<br>homestead associations, or credit<br>unions, brokerage houses, or<br>cooperatives. | Bank of America (Savings)                          | -   | 5.00   |
| <ol> <li>Security deposits with public<br/>utilities, telephone companies,<br/>landlords, and others.</li> </ol>  | X  |   |  |
| Household goods and furnishings,<br>including audio, video, and<br>computer equipment.  | Household Goods                                    | -   | 2,415.00   |
| 5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.   | X  |   |  |
| 6. Wearing apparel.   | Wearing Apparel                                    | -   | 200.00   |
| 7. Furs and jewelry.  | Jewelry  | -   | 200.00   |
| Firearms and sports, photographic,<br>and other hobby equipment.  | Recreational Equipment                             | -   | 25.00  |
| <ol> <li>Interests in insurance policies.         Name insurance company of each policy and itemize surrender or refund value of each.     </li> </ol>  | MetLife Whole Life Policy<br>Cash Value=\$3,271.00 | -   | 0.00   |
| 10. Annuities. Itemize and name each issuer.  | x  |   |  |
|   |  |   |  |
|   |  | Sub-Tota                                    | al > <b>2,845.00</b>   |

3 continuation sheets attached to the Schedule of Personal Property

(Total of this page)

B6B (Official Form 6B) (12/07) - Cont.

| In re | Christina Maria Carpenter | Case No     |  |
|-------|---------------------------|-------------|--|
|       |                           | ,<br>Debtor |  |

### SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| terests in an education IRA as fined in 26 U.S.C. § 530(b)(1) or der a qualified State tuition plan defined in 26 U.S.C. § 529(b)(1). ve particulars. (File separately the cord(s) of any such interest(s). U.S.C. § 521(c).)  terests in IRA, ERISA, Keogh, or mer pension or profit sharing ans. Give particulars.                                 | Ameri  | es Schwab IR <i>A</i><br>Trade Annuity   |   |  | Wife, Joint, or Community  | Debtor's Interest in Property without Deducting any Secured Claim or Exemption  0.00  0.00  0.00   |
|--|--|--|---|--|--|--|
| fined in 26 U.S.C. § 530(b)(1) or der a qualified State tuition plan defined in 26 U.S.C. § 529(b)(1). ve particulars. (File separately the cord(s) of any such interest(s). U.S.C. § 521(c).)  terests in IRA, ERISA, Keogh, or mer pension or profit sharing ans. Give particulars.  ock and interests in incorporated dunincorporated businesses. | Charle<br>Ameri<br>NC Sta  | Trade Annuity  | (\$700.00)  | ,204.61)   | -<br>-<br>-  | 0.00   |
| ner pension or profit sharing ans. Give particulars.  ock and interests in incorporated d unincorporated businesses.  emize.  terests in partnerships or joint   | Ameri<br>NC Sta<br>X   | Trade Annuity  | (\$700.00)  | ,204.61)   | -<br>-<br>-  | 0.00   |
| ock and interests in incorporated d unincorporated businesses. emize.  | NC Sta   |  |   | ,204.61)   | -  |  |
| d unincorporated businesses. emize. terests in partnerships or joint   | x  | ate Employees  | s Retirement (\$11  | ,204.61)   | -  | 0.00   |
| d unincorporated businesses. emize. terests in partnerships or joint   |  |  |   |  |  |  |
|  | Χ  |  |   |  |  |  |
|  |  |  |   |  |  |  |
| overnment and corporate bonds<br>d other negotiable and<br>onnegotiable instruments.   | X  |  |   |  |  |  |
| ecounts receivable.  | X  |  |   |  |  |  |
| imony, maintenance, support, and operty settlements to which the btor is or may be entitled. Give rticulars.   | X  |  |   |  |  |  |
| her liquidated debts owed to debtor cluding tax refunds. Give particulars.   | X  |  |   |  |  |  |
| quitable or future interests, life tates, and rights or powers ercisable for the benefit of the btor other than those listed in hedule A - Real Property.  | X  |  |   |  |  |  |
| ontingent and noncontingent<br>erests in estate of a decedent,<br>ath benefit plan, life insurance   | X  |  |   |  |  |  |
|  | perty settlements to which the boor is or may be entitled. Give rticulars.  ther liquidated debts owed to debtor cluding tax refunds. Give particulars.  uitable or future interests, life ates, and rights or powers ercisable for the benefit of the botor other than those listed in hedule A - Real Property.  Intingent and noncontingent erests in estate of a decedent, | perty settlements to which the botor is or may be entitled. Give rticulars.  Ther liquidated debts owed to debtor reluding tax refunds. Give particulars.  We with the particulars are funds or powers ercisable for the benefit of the botor other than those listed in hedule A - Real Property.  We with the property of the particular and noncontingent erests in estate of a decedent, with benefit plan, life insurance | perty settlements to which the botor is or may be entitled. Give rticulars.  Ther liquidated debts owed to debtor reluding tax refunds. Give particulars.  We attack, and rights or powers ercisable for the benefit of the botor other than those listed in hedule A - Real Property.  The property of the benefit of the botor other than those listed in hedule A is the property.  The property of the benefit of the botor other than those listed in hedule A is the property.  The property of the benefit of the botor other than those listed in hedule A is the property. | perty settlements to which the botor is or may be entitled. Give rticulars.  Ther liquidated debts owed to debtor reluding tax refunds. Give particulars.  We with the particulars are funds or powers ercisable for the benefit of the botor other than those listed in hedule A - Real Property.  We with the property of the period of a decedent, at the benefit plan, life insurance. | perty settlements to which the botor is or may be entitled. Give rticulars.  Ther liquidated debts owed to debtor reluding tax refunds. Give particulars.  We attack, and rights or powers ercisable for the benefit of the botor other than those listed in hedule A - Real Property.  We rests in estate of a decedent, atth benefit plan, life insurance  X | perty settlements to which the botor is or may be entitled. Give rticulars.  The liquidated debts owed to debtor liquidated liq |

0.00 Sub-Total > (Total of this page)

Sheet <u>1</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

 $B6B\ (Official\ Form\ 6B)\ (12/07)$  - Cont.

| In re | Christina Maria Carpenter | Case No      |
|-------|---------------------------|--------------|
| _     |                           | <del>,</del> |

Debtor

## SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

|     | Type of Property  | N<br>O<br>N<br>E        | Description and Location of Property  | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|-----|---|-------------------------|---|---|---|
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | X                       |   |   |   |
| 22. | Patents, copyrights, and other intellectual property. Give particulars.   | X                       |   |   |   |
| 23. | Licenses, franchises, and other general intangibles. Give particulars.  | X                       |   |   |   |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X                       |   |   |   |
| 25. | Automobiles, trucks, trailers, and other vehicles and accessories.  | (58<br>Re<br>VII<br>*D  | 06 Ford F250 Super Duty Crew Cab Lariat 4 WD<br>3,001 Miles)<br>tail \$26,875, -\$1,300 For Mileage<br>N #: 1FTSW21P76ED21494<br>EBTOR HAS 1/2 INTEREST WITH BOYFRIEND*<br>DEBTOR TO SURRENDER INTEREST** | -   | 25,575.00   |
|     |   | (51<br>Re<br>VII<br>All | 06 Ford Expedition Limited Utility 4 Dr. 2 WD<br>1,230 Miles)<br>tail \$24,850, -\$1,025 For Mileage<br>N #: 1FMFU16529LA59833<br>state Insurance Policy #: 935910533<br>O BE PAID DIRECTLY*              | -   | 23,825.00   |
| 26. | Boats, motors, and accessories.   | X                       |   |   |   |
| 27. | Aircraft and accessories.   | X                       |   |   |   |
| 28. | Office equipment, furnishings, and supplies.  | X                       |   |   |   |
| 29. | Machinery, fixtures, equipment, and supplies used in business.  | X                       |   |   |   |
| 30. | Inventory.  | X                       |   |   |   |
| 31. | Animals.  | X                       |   |   |   |
|     |   |                         |   | Sub-Total of this page)                     | al > <b>49,400.00</b>   |

Sheet **2** of **3** continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

| In re | Christina Maria Carpenter | Case No. |  |
|-------|---------------------------|----------|--|
|       |                           | Debtor   |  |

### **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

| Type of Property   | N<br>O<br>N<br>E | Description and Location of Property | Husband,<br>Wife,<br>Joint, or<br>Community | Current Value of<br>Debtor's Interest in Property,<br>without Deducting any<br>Secured Claim or Exemption |
|--|------------------|--------------------------------------|---|---|
| 32. Crops - growing or harvested. Give particulars.                  | X                |                                      |   |   |
| 33. Farming equipment and implements.                                | X                |                                      |   |   |
| 34. Farm supplies, chemicals, and feed.                              | X                |                                      |   |   |
| 35. Other personal property of any kind not already listed. Itemize. | X                |                                      |   |   |

| Sub-Total > | 0.00 | | (Total of this page) | Total > | 52,245.00 |

Sheet <u>3</u> of <u>3</u> continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

### UNITED STATES BANKRUPTCY COURT FOR THE Eastern DISTRICT OF NORTH CAROLINA RALEIGH DIVISION

| In Re: Christina Maria Carpenter  Social Security No.: xxx-xx-2456  Address: 105 Bay Tree Lane, Sanford, NC 27332 |         | Case No. Chapter 13 Revised 12/21/07) |
|---|---------|---------------------------------------|
|   | Debtor. |                                       |

### SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

I, the undersignedDebtor, claims the following property as exempt pursuant to 11 U.S.C. § 522 and the laws of the State of North Carolina, and non-bankruptcy Federal Law:

1 RESIDENCE: REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT.

Each debtor can retain an aggregate interest in such property, **not to exceed \$18,500** in net value. (N.C.G.S. § 1C-1601(a)(1) (NC Const. Article X, Section 2)(See\* below)

| Description of   | Market                                   | Owner (H), (W), (J) | Mortgage Holder or | Amount of        | Net         |
|--|--|---------------------|--------------------|------------------|-------------|
| Property & Address   | Value                                    |                     | Lien Holder        | Mortgage or Lien | Value       |
| House & Lot:<br>105 Baytree Lane<br>Sanford, NC 28332<br>*INCLUDES ABOVE<br>GROUND POOL* | \$137,500.00<br>minus 6%<br>\$129,250.00 |                     | SunTrust Mortgage  | \$107,846.00     | \$21,404.00 |

| TOTAL NET VALUE:         | \$21,404.00 |
|--------------------------|-------------|
| VALUE CLAIMED AS EXEMPT: | \$18,500.00 |

RESIDENCE: REAL OR PERSONAL PROPERTY USED AS A RESIDENCE OR BURIAL PLOT. Exception to \$18,500 limit: An unmarried debtor who is 65 years of age or older is entitled to retain an aggregate interest in property not to exceed \$37,000 in net value, so long as: (1) the property was previously owned by the debtor as a tenant by the entireties or as a joint tenant with rights of survivorship and (2) the former co-owner of the property is deceased, in which case the debtor must specify his/her age and the name of the former co-owner (if a child use initials only) of the property below. (N.C.G.S. § 1C-1601(a)(1) (NC Const. Article X, Section 2)(See \* below)

| Description of     | Market   | Owner (H),(W),(J) | Mortgage Holder or | Amount of        | Net   |
|--------------------|----------|-------------------|--------------------|------------------|-------|
| Property & Address | Value    |                   | Lien Holder        | Mortgage or Lien | Value |
|                    | minus 6% | Widow(er)         |                    |                  |       |

| Debtor's Age:            | TOTAL NET VALUE:         |  |
|--------------------------|--------------------------|--|
| Name of former co-owner: | VALUE CLAIMED AS EXEMPT: |  |

- \* Note to all interested parties: Notwithstanding the above, in the event that: (1) this concerns a Chapter 13 case filed within 12 months after the dismissal of a prior bankruptcy case, and (2) a creditor has, prior to the filing of this case, taken an "action" as that term is defined in In re: Paschal, 337 B.R. 27 (2006), the debtor(s) do not claim the property as exempt, in which case the above information is provided for the sole purpose of determining compliance as required by 11 U.S.C. 1325(a)(4). In addition, and as a separate and independent issue, in accordance with law, exemptions must be applied to the true net "liquidation value", after deducting for both: (1) The payoff balances on all mortgage and other liens, and (2) All projected, hypothetical administrative expenses (11 U.S.C. 522(k)) which would be incurred in relation to liquidation of said property. (See Scott v. U.S. Trustee, 133 F.3d 917 (4th Cir.)(1997)). Therefore, before applying exemptions, six (6%) percent (representing the standard real estate broker's commission) is deducted from Fair Market Value in order to conservatively approximate true liquidation value for the purpose of correctly applying exemptions.
- 2. MOTOR VEHICLE: Each debtor can claim an exemption in <u>one</u> vehicle, not to exceed \$3,500.00 in net value. (N.C.G.S. § 1C-1601(a)(3))

| Year, Make, Model, Style<br>of Motor Vehicle       | Market Value | Owner (H),(W),(J) | Lien Holder    | Amount of Lien | Net Value |
|--|--------------|-------------------|----------------|----------------|-----------|
| 2006 Ford Expedition Limited<br>Utility 4 Dr. 2 WD | \$23,825.00  |                   | Sovereign Bank | \$25,663.00    | \$0.00    |

| TOTAL NET VALUE:         | \$0.00 |
|--------------------------|--------|
| VALUE CLAIMED AS EXEMPT: | \$0.00 |

3. **PERSONAL AND HOUSEHOLD GOODS:** Each debtor can retain a total aggregate interest, not to exceed \$5,000.00 in net value, plus \$1000.00 in net value for each dependent of the debtor (not to exceed \$4,000 total for dependents.) (N.C.G.S. § 1C-1601(a)(4) & NC Const., Article X, Section 1)

The number of dependents for exemption purposes is:\_\_Three\_\_\_\_

| Description of Property | Market Value | Owner (H),(W),(J) | Lien Holder | Amount of Lien | Net Value |
|-------------------------|--------------|-------------------|-------------|----------------|-----------|
| Clothing & Personal     |              |                   |             |                | \$200.00  |
| Kitchen Appliances      |              |                   |             |                | \$50.00   |
| Stove                   |              |                   |             |                | \$100.00  |
| Refrigerator            |              |                   |             |                | \$200.00  |
| Freezer                 |              |                   |             |                | \$50.00   |
| Washing Machine         |              |                   |             |                | \$75.00   |
| Dryer                   |              |                   |             |                | \$50.00   |
| China                   |              |                   |             |                | \$75.00   |
| Silver                  |              |                   |             |                | \$0.00    |
| Jewelry                 |              |                   |             |                | \$200.00  |
| Living Room Furniture   |              |                   |             |                | \$300.00  |
| Den Furniture           |              |                   |             |                | \$0.00    |
| Bedroom Furniture       |              |                   |             |                | \$300.00  |
| Dining Room Furniture   |              |                   |             |                | \$350.00  |

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| Lawn Furniture           | \$0.00   |
|--------------------------|----------|
| Television               | \$35.00  |
| ( ) Stereo ( ) Radio     | \$20.00  |
| ( ) VCR ( ) Video Camera | \$35.00  |
| Musical Instruments      | \$0.00   |
| ( ) Piano ( ) Organ      | \$150.00 |
| Air Conditioner          | \$0.00   |
| Paintings or Art         | \$0.00   |
| Lawn Mower               | \$500.00 |
| Yard Tools               | \$75.00  |
| Crops                    | \$0.00   |
| Recreational Equipment   | \$25.00  |
| Computer Equipment       | \$50.00  |

| TOTAL NET VALUE:         | \$2,840.00 |
|--------------------------|------------|
| VALUE CLAIMED AS EXEMPT: | \$2,840.00 |

4. TOOLS OF TRADE: (Each debtor can retain an aggregate interest, not to exceed \$2,000.00 in net value.) (N.C.G.S. § 1C-1601(a)(5))

| Description | Market Value | Owner (H),(W),(J) | Lien Holder | Amount of Lien | Net Value |
|-------------|--------------|-------------------|-------------|----------------|-----------|
| None        |              |                   |             |                | \$0.00    |

| TOTAL NET VALUE:         | \$0.00 |
|--------------------------|--------|
| VALUE CLAIMED AS EXEMPT: | \$0.00 |

5. LIFE INSURANCE: There is no limit on amount or number of policies. (N.C.G.S. § 1C-1601(a)(6) & NC Const., Article X, Sect. 5)

| Description & Company | Insured             | Last 4 Digits<br>of Policy Number | Beneficiary<br>(If child, use initials only) |
|-----------------------|---------------------|-----------------------------------|--|
| MetLife Insurance     | Christina Carpenter | 4364A                             | Frank Salvo                                  |

| 6. | PROFESSIONALLY PR   | ESCRIBED 1 | HEALTH | AIDS: | Debtor | or I | Debtor's | Dependents. | (No | limit o | on value.) | (N.C.G.S. | § 1C- |
|----|---------------------|------------|--------|-------|--------|------|----------|-------------|-----|---------|------------|-----------|-------|
|    | 1601(a)(7) <u>)</u> |            |        |       |        |      |          |             |     |         |            |           |       |

| Description |  |  |
|-------------|--|--|
|             |  |  |

| 7. | COMPENSATION FOR PERSONAL INJURY, INCLUDING COMPENSATION FROM PRIVATE DISABILITY POLICIES                             |
|----|---|
|    | OR ANNUITIES, OR COMPENSATION FOR THE DEATH OF A PERSON UPON WHOM THE DEBTOR WAS                                      |
|    | DEPENDENT FOR SUPPORT. There is no limit on this exemption. All such amounts are claimed as exempt. (The compensation |
|    | is not exempt from related legal, health or funeral expenses.) (N.C.G.S. § 1C-1601(a)(8))                             |

| Description | Source of Compensation | Last 4 Digits of<br>Any Account Number |
|-------------|------------------------|--|
|             |                        |  |

8. **WILDCARD EXEMPTION:** Each debtor can retain a total aggregate interest in any other property, not to exceed a net value of \$5,000.00, or the unused portion of the debtor's <u>residence</u> exemption, <u>whichever is less</u>. (N.C.G.S. § 1C-1601(a)(2))

| Description of the Property  | Market Value | Owner (H),(W),(J) | Lien Holder | Amount of<br>Lien | Net Value |
|--|--------------|-------------------|-------------|-------------------|-----------|
| Any property owned by the debtor(s), not otherwise claimed as exempt (see * below) |              |                   |             |                   | \$0.00    |
| None   |              |                   |             |                   | \$0.00    |

| TOTAL NET VALUE:         | \$0.00 |
|--------------------------|--------|
| VALUE CLAIMED AS EXEMPT: | \$0.00 |

- \* including therewith any and all amounts on deposit, if any, as of the date of filing, in bank or investment accounts, above and beyond those amounts specifically referenced and exempted in this exemption, but only to the extent of and not exceeding the residual value available pursuant to this exemption.
- 9. INDIVIDUAL RETIREMENT PLANS & RETIREMENT FUNDS: All the value is claimed as exempt in such plans and funds, as defined in the Internal Revenue Code, and any plan treated in the same manner as an individual retirement plan, including individual retirement accounts and Roth retirement accounts as described in Sections 408(a) and 408A of the Internal Revenue Code, individual retirement annuities as described in Section 408(b) of the Internal Revenue Code, accounts established as part of a trust described in Section 408(c) of the Internal Revenue Code, and funds in an account exempt from taxation under Sections 401, 403, 408, 408A, 414, 457, or 510(a) of the Internal Revenue Code. For purposes of this subdivision, "Internal Revenue Code" means Code as defined in G.S. 105-228.90.(N.C.G.S. § 1C-1601(a)(9) and 11 U.S.C. 522) (There is no limit on amount of this exemption. All such funds are claimed as exempt.)
- 10. **FUNDS IN A COLLEGE SAVINGS PLAN**, as qualified under Section 529 of the Internal Revenue Code, and that are not otherwise excluded from the estate pursuant to 11 U.S.C. Sections 541(b)(5)-(6), and (e), not to exceed a cumulative limit of \$25,000. If funds were placed in a college savings plan within the 12 months prior to filing, such contributions must have been made in the ordinary course of the debtor's financial affairs and must have been consistent with the debtor's past pattern of contributions. The exemption applies to funds for a child of the debtor that will actually be used for the child's college or university expenses. (N.C.G.S. § 1C-1601(a)(10))

| College Savings<br>Plan | Last 4 Digits of Account Number | Initials of<br>Child Beneficiary | Value |
|-------------------------|---------------------------------|----------------------------------|-------|
|                         |                                 |                                  |       |

| VALUE CLAIMED AS EXEMPT: |  |
|--------------------------|--|

| 11. | RETIREMENT BENEFITS UNDER THE RETIREMENT PLANS OF OTHER STATES AND GOVERNMENT UNITS OF  |
|-----|---|
|     | OTHER STATES (The debtor's interest is exempt only to the extent that these benefits are exempt under the law of the State or |
|     | governmental unit under which the benefit plan is established.) (N.C.G.S. § 1C-1601(a)(11))                                   |

| Name of Retirement Plan | State or Governmental Unit | Last 4 Digits of Identifying<br>Number | Value |
|-------------------------|----------------------------|--|-------|
|                         |                            |  |       |

|--|

12. ALIMONY, SUPPORT, SEPARATE MAINTENANCE, AND CHILD SUPPORT PAYMENTS OR FUNDS THAT HAVE BEEN RECEIVED OR TO WHICH THE DEBTOR IS ENTITLED (The debtor's interest is exempt to the extent the payments or funds are reasonably necessary for the support of the debtor or any dependent of the debtor.) (N.C.G.S. § 1C-1601(a)(12))

| Type of Support | Location of Funds | Amount |
|-----------------|-------------------|--------|
|                 |                   |        |

| AS EXEMPT: |
|------------|
|------------|

13. **TENANCY BY THE ENTIRETY**: **All the net value** in the following property is claimed as exempt pursuant to 11 U.S.C. § 522(b)(2)(B) and the law of the State of North Carolina pertaining to property held as tenants by the entirety. (No limit on amount or number of items.)(See \* above in this document)

|         | Description of Property & Address |  |
|---------|-----------------------------------|--|
| 1. None |                                   |  |
| 2. None |                                   |  |

### 14. NORTH CAROLINA PENSION FUND EXEMPTIONS:

|    |  | Amount |
|----|--|--------|
| a. | North Carolina Local Government Employees Retirement Benefits N.C.G.S. § 128-31  |        |
| b. | North Carolina Teachers and State Employee Retirement Benefits N.C.G.S. § 135-9  |        |
| c. | Fireman's Relief Fund pensions N.C.G.S. § 58-86-90   |        |
| d. | Fraternal Benefit Society benefits N.C.G.S. § 58-24-85   |        |
| e. | Benefits under the Supplemental Retirement Income Plan for teachers and state employees are exempt from levy, sale, and garnishment N.C.G.S. § 135-95          |        |
| f. | Benefits under the Supplemental Retirement Income Plan for state law enforcement officers are exempt from levy, sale, and garnishment N.C.G.S. § 143-166.30(g) |        |

### 15. OTHER EXEMPTIONS CLAIMED UNDER THE LAWS OF THE STATE OF NORTH CAROLINA:

|    |   | Amount           |
|----|---|------------------|
| a. | Aid to the Aged, Disabled and Families with Dependent Children N.C.G.S. § 108A-36   |                  |
| b. | Aid to the Blind N.C.G.S. § 111-18  |                  |
| c. | Yearly Allowance of Surviving Spouse N.C.G.S. § 30-15   |                  |
| d. | Workers Compensation benefits N.C.G.S. § 97-21  |                  |
| e. | Unemployment benefits, so long as not commingled and except for debts for necessities purchased while unemployed N.C.G.S. § 96-17   |                  |
| f. | Group insurance proceeds N.C.G.S. § 58-58-165   |                  |
| g. | Partnership property, except on a claim against the partnership N.C.G.S. § 59-55  |                  |
| h. | ** Any and all amounts on deposit in checking, savings or other accounts on the date of filing, if any, above and beyond amounts claimed under the wildcard exemption, that qualify pursuant to the requirements of this exemption. | See ** (to left) |
| i. | Benefits under the Separate Insurance Benefits Plan for state and local law enforcement officers are exempt from levy, sale, and garnishment N.C.G.S. § 143-166.60(h)   |                  |
| j. | Vested benefits under the North Carolina Public Employee Deferred Compensation Plan are exempt from levy, sale, and garnishment N.C.G.S. § 147-9.4  |                  |

| VALUE CLAIMED AS EXEMPT: | \$0.00 |
|--------------------------|--------|
|--------------------------|--------|

### 16. FEDERAL PENSION FUND EXEMPTIONS:

|   | Amount |
|---|--------|
| a. Foreign Service Retirement and Disability Payments 22 U.S.C. § 4060              |        |
| b. Civil Service Retirement Benefits 5 U.S.C. § 8346                                |        |
| c. Railroad Retirement Act annuities and pensions 45 U.S.C. § 231m                  |        |
| d. Veteran benefits 38 U.S.C. § 5301  |        |
| e. Special pension paid to winners of Congressional Medal of Honor 38 U.S.C. § 1562 |        |
| f. Annuities payable for service in the General Accounting Office 31 U.S.C. § 776   |        |

| VALUE CLAIMED AS EXEMPT: | \$0.00 |
|--------------------------|--------|
|                          |        |

### 17. OTHER EXEMPTIONS CLAIMED UNDER NON-BANKRUPTCY FEDERAL LAW:

|   | Amount |
|---|--------|
| a. Social Security Benefits 42 U.S.C. § 407   |        |
| b. Injury or death compensation payments from war risk hazards 42 U.S.C. § 1717                           |        |
| c. Wages owing a master or seaman, except for support of a spouse and/or minor children 46 U.S.C. § 11109 |        |

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| d. | Longshoremen and Harbor Workers Compensation Act death and disability benefits 33 U.S.C. § 916 |  |
|----|--|--|
| e. | Crop insurance proceeds 7 U.S.C. § 1509  |  |
| f. | Public safety officers' death benefits 42 U.S.C. § 3796. See subsection (g).                   |  |
| g. | Railroad unemployment insurance 45 U.S.C. § 352. See subsection (e).                           |  |

| VALUE CLAIMED AS EXEMPT: | \$0.00 |
|--------------------------|--------|
|--------------------------|--------|

### UNSWORN DECLARATION UNDER PENALTY OF PERJURY

| ne undersignedDebtor, declares under penalty of perjury that I have read the foregoing Schedule C - Property Claimed as Exempt, isting of 14 paragraphs on consecutive pages, and that they are true and correct to the best of my knowledge, information and belief. |
|---|
| ed:   |
| s/ Christina Maria Carpenter  |
| Christina Maria Carpenter   |

B6D (Official Form 6D) (12/07)

| In re | Christina Maria Carpenter |        | Case No. |  |
|-------|---------------------------|--------|----------|--|
|       |                           | Debtor |          |  |

### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Unliquidated". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                       | CODEBTOR | 1 | sband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN  | CONTINGEN | UN L S P UT E D  | VALUE OF          | UNSECURED<br>PORTION, IF<br>ANY |
|--|----------|---|---|-----------|------------------|-------------------|---------------------------------|
| Account No. 41646292  Creditor #: 1 Ford Motor Credit Company Post Office Box 55000  Drawer 55-953  Detroit, MI 48255-0953 | x        | - | 2006 Purchase Money Security Interest 2006 Ford F250 Super Duty Crew Cab Lariat 4 WD (58,001 Miles) Retail \$26,875, -\$1,300 For Mileage VIN #: 1FTSW21P76ED21494 *DEBTOR HAS 1/2 INTEREST WITH BOYFRIEND* | T T       | A<br>T<br>E<br>D |                   |                                 |
| Account No.  Representing: Ford Motor Credit Company   |          |   | Value \$ 25,575.00  Ford Motor Credit National Bankruptcy Service Center Post Office Box 537901 Livonia, MI 48153-7901  |           |                  | 41,483.03         | 15,908.03                       |
| Account No.  Representing: Ford Motor Credit Company   |          |   | Value \$  Hubert Vester Ford 213 Southeast Boulevard Clinton, NC 28328  |           |                  |                   |                                 |
| Account No.  Creditor #: 2 Harnett County Tax Collector 305 West Cornelius Harnett Blvd. Suite 101                         | -        | _ | Value \$  2008  Possible Obligation/County Tax Lien House & Lot: 105 Baytree Lane Sanford, NC 27332   | -         |                  |                   |                                 |
| Lillington, NC 27546  1 continuation sheets attached   |          |   | *INCLUDES ABOVE GROUND POOL*  Value \$ 137,500.00   | Subto     | otal             | 0.00<br>41,483.03 | 0.00                            |

 $B6D\ (Official\ Form\ 6D)\ (12/07)$  - Cont.

| In re | Christina Maria Carpenter | Case No |  |
|-------|---------------------------|---------|--|
| _     |                           | Debtor  |  |

## SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS (Continuation Sheet)

| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)                              | CODEBTOR |      | DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN   | COZH-ZGEZ | DZ L Q D L D A F | SPUTE    | AMOUNT OF<br>CLAIM<br>WITHOUT<br>DEDUCTING<br>VALUE OF<br>COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY |
|---|----------|------|--|-----------|------------------|----------|--|---------------------------------|
| Account No. 8257148901  Creditor #: 3  Sovereign Bank  Post Office Box 12646  Reading, PA 19612-2646                        |          | -    | 2007 Purchase Money Security Interest 2006 Ford Expedition Limited Utility 4 Dr. 2 WD (51,230 Miles) Retail \$24,850, -\$1,025 For Mileage VIN #: 1FMFU16529LA59833 Allstate Insurance Policy #: 935910533 *TO BE PAID DIRECTLY* | T         | T<br>E<br>D      |          |  |                                 |
| Account No.   | ┝        |      | Value \$ 23,825.00   |           |                  | $\dashv$ | 25,663.00  | 1,838.00                        |
| Representing:<br>Sovereign Bank   |          |      | Tom Smith Ford<br>945 North Main Street<br>Lillington, NC 27546  |           |                  |          |  |                                 |
|   |          |      | Value \$   | 1         |                  |          |  |                                 |
| Account No. <b>0037269750</b>   |          |      | 2006   |           |                  |          |  |                                 |
| Creditor #: 4<br>SunTrust Mortgage, Inc.<br>Customer Service Department<br>Post Office Box 26149<br>Richmond, VA 23260-6149 |          | -    | Deed of Trust House & Lot: 105 Baytree Lane Sanford, NC 27332 *INCLUDES ABOVE GROUND POOL*   |           |                  |          |  |                                 |
|   |          |      | Value \$ 137,500.00  |           |                  |          | 107,845.40   | 0.00                            |
| Account No.   |          |      | Value \$   |           |                  |          |  |                                 |
| Account No.   |          |      |  |           |                  |          |  |                                 |
|   |          |      | Value \$   |           |                  |          |  |                                 |
| Sheet 1 of 1 continuation sheets attac  |          | d to | )  | ubt       |                  |          | 133,508.40   | 1,838.00                        |
| Schedule of Creditors Holding Secured Claims (Total of this page)   |          |      |  |           |                  | - 1      |  |                                 |
|   |          |      | (Report on Summary of Sc   |           | `ota<br>lule     |          | 174,991.43   | 17,746.03                       |

B6E (Official Form 6E) (12/07)

| •     |                           |          |
|-------|---------------------------|----------|
| In re | Christina Maria Carpenter | Case No. |
| -     |                           | Debtor   |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the

| column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Unliquidated." (You may need to place an "X" in more than one of these three columns.)  |
|---|
| Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "The box labeled "Subtotals" on each sheet.   |
| "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.  Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priorit listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total |
| also on the Statistical Summary of Certain Liabilities and Related Data.  Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to   |
| priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.   |
| ☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.   |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)   |
| ☐ Domestic support obligations  |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).   |
| ☐ Extensions of credit in an involuntary case   |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3).   |
| ☐ Wages, salaries, and commissions  |
| Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).  |
| ☐ Contributions to employee benefit plans   |
| Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).   |
| ☐ Certain farmers and fishermen   |
| Claims of certain farmers and fishermen, up to \$5,400* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).  |
| ☐ Deposits by individuals   |
| Claims of individuals up to \$2,425* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).  |
| ■ Taxes and certain other debts owed to governmental units  |
| Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).   |
| ☐ Commitments to maintain the capital of an insured depository institution  |
| Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federa Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).   |

#### ☐ Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

#### Administrative Expenses

Administrative expenses allowed under 11 U.S.C. § 503(b), and any fees and charges assessed against the estate under chapter 123 of title 28 as provided in 11 U.S.C. 507(a)(2).

continuation sheets attached

<sup>\*</sup> Amounts are subject to adjustment on April 1, 2010, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (12/07) - Cont.

| In re | Christina Maria Carpenter |        | Case No. |  |
|-------|---------------------------|--------|----------|--|
| -     | ·                         | Debtor | _,       |  |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CONTINGENT CREDITOR'S NAME, SPUTED AND MAILING ADDRESS Н AMOUNT DATE CLAIM WAS INCURRED INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY AND ACCOUNT NUMBER C (See instructions.) Account No. 280-72-2456 12/31/07 Creditor #: 1 **Federal Income Taxes** Internal Revenue Service 0.00 Post Office Box 21126 Philadelphia, PA 19114-0326 9,242.87 9,242.87 Account No. 280-72-2456 12/31/07 Creditor #: 2 State Income Taxes North Carolina Dept of Revenue 0.00 Post Office Box 1168 Raleigh, NC 27602-1168 2.973.00 2.973.00 Account No. North Carolina Department of Revenu c/o NC Department of Justice Representing: Post Office Box 629 North Carolina Dept of Revenue Raleigh, NC 27602-0629 Account No. North Carolina Department of Revenu c/o Reginald S. Hinton Representing: Post Office Box 25000 North Carolina Dept of Revenue Raleigh, NC 27640-5000 Account No. Subtotal 0.00 Sheet 1 of 2 continuation sheets attached to

(Total of this page)

Schedule of Creditors Holding Unsecured Priority Claims

12,215.87

12,215.87

B6E (Official Form 6E) (12/07) - Cont.

| In re | Christina Maria Carpenter | Case No |  |
|-------|---------------------------|---------|--|
| _     |                           | Debtor  |  |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

### **Administrative Expenses**

TYPE OF PRIORITY CODEBTOR Husband, Wife, Joint, or Community CONTINGENT UNLIQUIDATED AMOUNT NOT ENTITLED TO PRIORITY, IF ANY CREDITOR'S NAME, SPUTED AND MAILING ADDRESS Н **AMOUNT** DATE CLAIM WAS INCURRED INCLUDING ZIP CODE, W AND CONSIDERATION FOR CLAIM OF CLAIM AMOUNT ENTITLED TO PRIORITY C AND ACCOUNT NUMBER (See instructions.) 2008 Account No. Creditor #: 3 **Attorney Fees** The Law Offices of John T. Orcutt, 0.00 6616-203 Six Forks Road Raleigh, NC 27615 2,500.00 2,500.00 Account No. Account No. Account No. Account No. Subtotal 0.00 Sheet **2** of **2** continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims (Total of this page) 2,500.00 2,500.00 Total 0.00

(Report on Summary of Schedules)

14,715.87

14,715.87

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B6F (Official Form 6F) (12/07)

| In re | Christina Maria Carpenter | Case No. |  |
|-------|---------------------------|----------|--|
| _     |                           | Debtor   |  |

### SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

|   |        |             | <u>r</u>                             |           |         |      |   |                 |
|---|--------|-------------|--------------------------------------|-----------|---------|------|---|-----------------|
| CREDITOR'S NAME,  | CO     | Hu          | sband, Wife, Joint, or Community     | C         | U       | ļ    | 7 |                 |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                  | DEBTOR | C<br>A<br>M | I DATE CLAUVEW AS INCURRED AND       | COZHLZGEZ | Q U L D | FUTE | J | AMOUNT OF CLAIM |
| Account No. 145416993676  | 1      |             | 2006                                 | ٦ ٢<br>۲  | A<br>T  |      | Ī |                 |
| Creditor #: 1<br>American General Finance<br>1915 Bragg Street<br>Sanford, NC 27330-5854          |        | -           | Merchandise Purchase                 |           | E<br>D  |      |   |                 |
| Account No.   | 1      |             | US Furniture Outlet                  |           |         | L    | 1 | 1,868.25        |
| Representing: American General Finance  |        |             | 409 Wilson Road<br>Sanford, NC 27330 |           |         |      |   |                 |
| Account No.   | 1      |             | 2006                                 | 1         |         | T    | 1 |                 |
| Creditor #: 2<br>David Anderson<br>6916 Inglenook Cove<br>Apt. 1817<br>Midvale, UT 84047          |        | -           | Possible Obligation/Cosigned Debt    |           |         |      |   | 0.00            |
| Account No. 4118-7091-0051-1879   | t      | T           | 2006                                 |           |         | T    | 1 |                 |
| Creditor #: 3 First Citizens Bank Attn: Patrice Sims Post Office Box 25187 Raleigh, NC 27611-5187 |        | -           | Credit Card Purchases                |           |         |      |   | 12,051.57       |
| 3 continuation sheets attached  | -      |             | (Total of t                          | Subt      |         |      | ) | 13,919.82       |

 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

| In re | Christina Maria Carpenter | Case No |  |
|-------|---------------------------|---------|--|
|       |                           | Debtor  |  |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | H W      | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | SPUTE | AMOUNT OF CLAIM |
|---|----------|----------|---|------------|--------------|-------|-----------------|
| Account No.   |          |          | First Citizens Bank   | ] ⊤        | T<br>E       |       |                 |
| Representing:   | 1        |          | Attn: BC Nelson   | $\vdash$   | D            | _     |                 |
| First Citizens Bank   |          |          | Post Office Box 28203<br>Raleigh, NC 27611-8203   |            |              |       |                 |
| Account No.   |          |          | First Citizens Bank   |            |              |       |                 |
| Representing:<br>First Citizens Bank  |          |          | Post Office Box 1580<br>Roanoke, VA 24007-1580  |            |              |       |                 |
| Account No. 0038498466207   |          |          | 2006  |            |              |       |                 |
| Creditor #: 4   |          |          | Line of Credit  |            |              |       |                 |
| First Citizens Bank<br>Attn: Patrice Sims   |          | <u> </u> |   |            |              |       |                 |
| Post Office Box 25187   |          |          |   |            |              |       |                 |
| Raleigh, NC 27611-5187  |          |          |   |            |              |       |                 |
|   |          |          |   |            |              |       | 5,073.07        |
| Account No.   |          |          | First Citizens Bank   |            |              |       |                 |
| Representing:   |          |          | Attn: BC Nelson<br>Post Office Box 28203  |            |              |       |                 |
| First Citizens Bank   |          |          | Raleigh, NC 27611-8203  |            |              |       |                 |
| THIST ORIZONS BUIN  |          |          |   |            |              |       |                 |
|   |          |          |   |            |              |       |                 |
| Account No.   |          |          | First Citizens Bank   |            |              |       |                 |
|   |          |          | Post Office Box 1580<br>Roanoke, VA 24007-1580  |            |              |       |                 |
| Representing:   |          |          | Traditional Francisco   |            |              |       |                 |
| First Citizens Bank   |          |          |   |            |              |       |                 |
|   |          |          |   |            |              |       |                 |
|   | L        |          |   |            |              |       |                 |
| Sheet no1 of _3 sheets attached to Schedule of  |          |          |   | Sub        | tota         | ıl    | 5,073.07        |
| Creditors Holding Unsecured Nonpriority Claims  |          |          | (Total of t   | his        | pag          | ge)   | 3,073.07        |

 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

| In re | Christina Maria Carpenter | Case No |  |
|-------|---------------------------|---------|--|
|       |                           | Debtor  |  |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME,<br>MAILING ADDRESS                              | COD    | Hu<br>H     | sband, Wife, Joint, or Community  | C O N T I | U<br>N<br>L | D I S      |                 |
|--|--------|-------------|---|-----------|-------------|------------|-----------------|
| INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | DEBTOR | C<br>J<br>M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | NGENT     | QUIDATED    | SPUTED     | AMOUNT OF CLAIM |
| Account No.  |        |             | First Citizens Bank   | ĪΫ        | Τ̈́Ε        |            |                 |
| Representing:  |        |             | Post Office Box 27131   |           | D           | lacksquare |                 |
| First Citizens Bank  |        |             | Raleigh, NC 27611-7131  |           |             |            |                 |
|  |        |             |   |           |             |            |                 |
|  |        |             |   |           |             |            |                 |
|  |        |             |   |           |             |            |                 |
| Account No. 771-4-10-0538810532                                  |        |             | 2004<br>Credit Card Purchases   |           |             |            |                 |
| Creditor #: 5<br>Sams Club                                       |        |             | Credit Card Fulchases   |           |             |            |                 |
| Post Office Box 981064   |        | -           |   |           |             |            |                 |
| El Paso, TX 79998-1064   |        |             |   |           |             |            |                 |
|  |        |             |   |           |             |            | 1,015.90        |
| Account No.  | T      | T           | Sams Club   |           | T           | T          |                 |
| Representing:  |        |             | Post Office Box 981401  |           |             |            |                 |
| Sams Club  |        |             | El Paso, TX 79998-1401  |           |             |            |                 |
|  |        |             |   |           |             |            |                 |
|  |        |             |   |           |             |            |                 |
| Account No. <b>694676469</b>                                     | L      |             | 2008  | -         |             |            |                 |
| Creditor #: 6  | ł      |             | Utility Bills   |           |             |            |                 |
| Sprint   |        |             |   |           |             |            |                 |
| Post Office Box 7086   |        | -           |   |           |             |            |                 |
| London, KY 40742-7086  |        |             |   |           |             |            |                 |
|  |        |             |   |           |             |            | 55.83           |
| Account No.  |        |             | Sprint  |           |             |            |                 |
|  |        |             | Post Office Box 8077<br>London, KY 40742  |           |             |            |                 |
| Representing:  |        |             | London, 101 40742   |           |             |            |                 |
| Sprint   |        |             |   |           |             |            |                 |
|  |        |             |   |           |             |            |                 |
|  |        |             |   |           |             |            |                 |
| Sheet no. 2 of 3 sheets attached to Schedule of                  |        |             |   | Sub       |             |            | 1,071.73        |
| Creditors Holding Unsecured Nonpriority Claims                   |        |             | (Total of t   | his       | pag         | ge)        | ',5             |

 $B6F\ (Official\ Form\ 6F)\ (12/07)$  - Cont.

| In re | Christina Maria Carpenter | Case     | e No |
|-------|---------------------------|----------|------|
| -     |                           | Debtor , |      |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)            | CODEBTOR | Hu H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | N L I Q     | FUTE | D I SPUTED | AMOUNT OF CLAIM |
|--|----------|------|---|------------|-------------|------|------------|-----------------|
| Account No. 0150001406  Creditor #: 7 Wachovia Bank c/o Beckett & Lee Post Office Box 3001 Malvern, PA 19355 |          | -    | 2007<br>Possible Obligation   | ]          | T<br>E<br>D |      |            |                 |
| Account No.  Representing: Wachovia Bank   |          |      | Chatlee Sporting Goods<br>2615 Jefferson Davis Highway<br>Sanford, NC 27330                   |            |             |      |            | 0.00            |
| Account No.  Representing: Wachovia Bank   |          |      | Wachovia Dealer Services Post Office Box 25339 Santa Ana, CA 92799-5339                       |            |             |      |            |                 |
| Account No.  |          |      |   |            |             |      |            |                 |
| Account No.  |          |      |   |            | _           |      |            |                 |
| Sheet no3 of _3 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims                |          |      | (Total of   | Subt       |             |      |            | 0.00            |
| Creditors riolding Onsecuted Nonphority Claims   |          |      | (Report on Summary of So  | Т          | Γota        | al   | Ī          | 20,064.62       |

B6G (Official Form 6G) (12/07)

| In re | Christina Maria Carpenter | Case No |  |
|-------|---------------------------|---------|--|
| -     | <u> </u>                  | Debtor  |  |

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

**Rent To Own** 

**Drum Kit** 

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.

Edwards Music 524 McPherson Church Road Fayetteville, NC 28303

yetteville, NC 28303 \$24.00 Per Month for 19 Months
Buyout Option Available
09/01/08
\*RETAIN\*

curity Force Inc. Service Contract

Security Force Inc. 4805 Green Road Suite 110 Raleigh, NC 27616

Service Contract
Home Security Monitoring
\$39.99 Per Month for 36 Months
No Buyout Option Available
07/20/06
\*RETAIN\*

The Shed Depot 2700 South Horner Boulevard Sanford, NC 27332 Rent To Own Shed \$45.59 Per Month for 36 Months 11/16/06 Buyout Option Available \*RETAIN\* Case 08-05813-8-JRL Doc 1 Filed 08/28/08 Entered 08/28/08 11:01:12 Page 33 of 58

B6H (Official Form 6H) (12/07)

| In re | Christina Maria Carpenter |             | Case No. |  |
|-------|---------------------------|-------------|----------|--|
|       | <u> </u>                  | ,<br>Debtor |          |  |

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

David Anderson 6916 Inglenook Cove Apt. 1817 Midvale, UT 84047 Ford Motor Credit Company Post Office Box 55000 Drawer 55-953 Detroit, MI 48255-0953 B6I (Official Form 6I) (12/07)

| In re | Christina Maria Carpenter |           | Case No. |  |
|-------|---------------------------|-----------|----------|--|
|       |                           | Debtor(s) |          |  |

### SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital Status:  | DEPENDENTS OF   | F DEBTOR AND SE         | POUSE    |                |        |
|---|---|-------------------------|----------|----------------|--------|
| Divorced  | RELATIONSHIP(S): Son Daughter Son                               | AGE(S):<br>11<br>4<br>6 |          |                |        |
| <b>Employment:</b>  | DEBTOR  |                         | SPOUSE   |                |        |
| Occupation  | Teacher   |                         |          |                |        |
| Name of Employer  | Harnett County Public Schools                                   |                         |          |                |        |
| How long employed   | 3 Years   |                         |          |                |        |
| Address of Employer   | Post Office Box 1029<br>Lillington, NC 27546-1029               |                         |          |                |        |
|   | age or projected monthly income at time case filed)             |                         | DEBTOR   |                | SPOUSE |
|   | ry, and commissions (Prorate if not paid monthly)               | \$                      | 3,707.48 | \$             | N/A    |
| 2. Estimate monthly overtime  |   | \$                      | 0.00     | \$             | N/A    |
| 3. SUBTOTAL   |   | \$                      | 3,707.48 | \$             | N/A    |
| 4. LESS PAYROLL DEDUC   | TIONS   |                         |          |                |        |
| a. Payroll taxes and soci   |   | \$                      | 819.80   | \$             | N/A    |
| b. Insurance  | an socurity   | \$ <del>-</del>         | 36.65    | \$ <del></del> | N/A    |
| c. Union dues   |   | \$ <del>-</del>         | 0.00     | \$             | N/A    |
| d. Other (Specify):   | Retirement  | \$ <del>-</del>         | 222.45   | \$ <del></del> | N/A    |
| (option)/.  | United Way  | \$_                     | 5.00     | \$             | N/A    |
| 5. SUBTOTAL OF PAYROL   | L DEDUCTIONS  | \$                      | 1,083.90 | \$             | N/A    |
| 6. TOTAL NET MONTHLY  | TAKE HOME PAY   | \$                      | 2,623.58 | \$             | N/A    |
| 7. Regular income from opera  | ation of business or profession or farm (Attach detailed states | ment) \$                | 0.00     | \$             | N/A    |
| 8. Income from real property  |   | \$                      | 0.00     | \$             | N/A    |
| 9. Interest and dividends   |   | \$                      | 0.00     | \$             | N/A    |
| 10. Alimony, maintenance or dependents listed above                               | support payments payable to the debtor for the debtor's use of  | or that of \$           | 628.00   | \$             | N/A    |
| 11. Social security or government   | nent assistance   |                         |          |                |        |
| (Specify):  |   | \$                      | 0.00     | \$             | N/A    |
|   |   | \$ <b>_</b>             | 0.00     | \$ <u></u>     | N/A    |
| <ul><li>12. Pension or retirement inco</li><li>13. Other monthly income</li></ul> | ome   | \$ <u>_</u>             | 0.00     | \$             | N/A    |
| (Specify):  |   | \$                      | 0.00     | \$             | N/A    |
|   |   | \$ <u></u>              | 0.00     | \$             | N/A    |
| 14. SUBTOTAL OF LINES 7   | THROUGH 13  | \$                      | 628.00   | \$             | N/A    |
| 15. AVERAGE MONTHLY   | INCOME (Add amounts shown on lines 6 and 14)                    | \$                      | 3,251.58 | \$             | N/A    |
| 16 COMBINED AVERAGE   | MONTHI V INCOME: (Combine column totals from line 1             | 5)                      | \$       | 3,251.         | .58    |

(Report also on Summary of Schedules and, if applicable, on Statistical Summary of Certain Liabilities and Related Data)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document: **None** 

B6J (Official Form 6J) (12/07)

| In re | Christina Maria Carpenter |           | Case No. |  |
|-------|---------------------------|-----------|----------|--|
|       |                           | Debtor(s) | •        |  |

### SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| Complete this schedule by estimating the average or projected monthly expenses of the debtor and case filed. Prorate any payments made bi-weekly, quarterly, semi-annually, or annually to show months expenses calculated on this form may differ from the deductions from income allowed on Form 22A or | ly rate. The |                 |
|---|--------------|-----------------|
| ☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Compexpenditures labeled "Spouse."  |              | ate schedule of |
| 1. Rent or home mortgage payment (include lot rented for mobile home)   | \$           | 704.34          |
| a. Are real estate taxes included? Yes No _X  |              |                 |
| b. Is property insurance included? Yes No _X_   |              |                 |
| 2. Utilities: a. Electricity and heating fuel   | \$           | 275.00          |
| b. Water and sewer  | \$           | 23.00           |
| c. Telephone  | \$           | 0.00            |
| d. Other See Detailed Expense Attachment  | \$           | 235.00          |
| 3. Home maintenance (repairs and upkeep)  | \$           | 0.00            |
| 4. Food   | \$           | 600.00          |
| 5. Clothing   | \$           | 50.00           |
| 6. Laundry and dry cleaning   | \$           | 50.35           |
| 7. Medical and dental expenses  | \$           | 0.00            |
| 8. Transportation (not including car payments)  | \$           | 150.00          |
| 9. Recreation, clubs and entertainment, newspapers, magazines, etc.   | \$           | 23.00           |
| 10. Charitable contributions  | \$           | 0.00            |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   |              |                 |
| a. Homeowner's or renter's  | \$           | 56.00           |
| b. Life   | \$           | 0.00            |
| c. Health   | \$           | 0.00            |
| d. Auto   | \$           | 88.00           |
| e. Other  | \$           | 0.00            |
| 12. Taxes (not deducted from wages or included in home mortgage payments)   |              |                 |
| (Specify) See Detailed Expense Attachment   | \$           | 104.00          |
| 13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the  |              |                 |
| plan)   |              |                 |
| a. Auto   | \$           | 456.31          |
| b. Other See Detailed Expense Attachment  | \$           | 109.58          |
| 14. Alimony, maintenance, and support paid to others  | \$           | 0.00            |
| 15. Payments for support of additional dependents not living at your home   | \$           | 0.00            |
| 16. Regular expenses from operation of business, profession, or farm (attach detailed statement)  | \$           | 0.00            |
| 17. Other Chapter 13 Plan Payment   | \$           | 327.00          |
| Other   | \$           | 0.00            |
| 18. AVERAGE MONTHLY EXPENSES (Total lines 1-17. Report also on Summary of Schedules   | \$           | 3,251.58        |
| and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)  | Φ            | 3,231.30        |
| 19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year   | L            |                 |
| following the filing of this document:  |              |                 |
| None  |              |                 |
| 20. STATEMENT OF MONTHLY NET INCOME   | _            |                 |
|   | ¢            | 3,251.58        |
| <ul><li>a. Average monthly income from Line 15 of Schedule I</li><li>b. Average monthly expenses from Line 18 above</li></ul>   | \$           | 3,251.58        |
|   | φ            | 0.00            |
| c. Monthly net income (a. minus b.)   | Φ            | 0.00            |

B6J (Official Form 6J) (12/07)

| In re | Christina Maria Carpenter | Case No.                                  |  |
|-------|---------------------------|---|--|
|       |                           | <br>· · · · · · · · · · · · · · · · · · · |  |

Debtor(s)

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S) Detailed Expense Attachment

### **Other Utility Expenditures:**

| Cablevision                             | <u> </u> | 136.00 |
|---|----------|--------|
| Cellular Phone                          | \$       | 99.00  |
| Total Other Utility Expenditures        | \$       | 235.00 |
| Specific Tax Expenditures:              |          |        |
| Personal Property Taxes                 | \$       | 25.00  |
| Real Property Taxes                     | \$       | 79.00  |
| Total Tax Expenditures                  | \$       | 104.00 |
| Other Installment Payments:             |          |        |
| The Shed Depot                          | \$       | 45.59  |
| Security Force                          | \$       | 39.99  |
| Edwards Music                           | \$       | 24.00  |
| <b>Total Other Installment Payments</b> | \$       | 109.58 |

## Case 08-05813-8-JRL Doc 1 Filed 08/28/08 Entered 08/28/08 11:01:12 Page 37 of 58

B22C (Official Form 22C) (Chapter 13) (01/08)

| In re  | Christina Maria Carpenter | According to the calculations required by this statement:           |
|--------|---------------------------|---|
| III IC | Debtor(s)                 | ■ The applicable commitment period is 3 years.                      |
| Case N | fumber:                   | — ☐ The applicable commitment period is 5 years.                    |
|        | (If known)                | ☐ Disposable income is determined under § 1325(b)(3).               |
|        |                           | ■ Disposable income is not determined under § 1325(b)(3).           |
|        |                           | (Check the boxes as directed in Lines 17 and 23 of this statement.) |

## CHAPTER 13 STATEMENT OF CURRENT MONTHLY INCOME AND CALCULATION OF COMMITMENT PERIOD AND DISPOSABLE INCOME

In addition to Schedules I and J, this statement must be completed by every individual chapter 13 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

|   | Par   | t I.                 | REPORT OF IN                                       | CO            | ME                                      |    |          |    |          |
|---|---|----------------------|--|---------------|---|----|----------|----|----------|
|   | Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.  |                      |  |               |   |    |          |    |          |
| 1 | a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 2-10.  |                      |  |               |   |    |          |    |          |
|   | b. $\square$ Married. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 2-10.   |                      |  |               |   |    |          |    |          |
|   | All figures must reflect average monthly income re  |                      |  |               |   |    | Column A |    | Column B |
|   | six calendar months prior to filing the bankruptcy of before the filing. If the amount of monthly income  |                      |  |               |   |    | Debtor's |    | Spouse's |
|   | divide the six-month total by six, and enter the res  |                      |  |               |   |    | Income   |    | Income   |
| 2 | Gross wages, salary, tips, bonuses, overtime, co  |                      | ** *   |               |   | \$ | 3,707.48 | \$ |          |
| 3 | Income from the operation of a business, profes and enter the difference in the appropriate column business, profession or farm, enter aggregate number enter a number less than zero. Do not include on Line b as a deduction in Part IV.  | (s) o<br>bers        | of Line 3. If you op<br>and provide detail         | oera<br>Is oi | te more than one an attachment. Do      | Ψ  | 0,101140 | Ψ  |          |
|   |   |                      | Debtor   |               | Spouse                                  |    |          |    |          |
|   | a. Gross receipts   | \$                   | 0.00   |               |   |    |          |    |          |
|   | b. Ordinary and necessary business expenses   | \$                   | 0.00   |               |   |    |          | ١. |          |
|   | c. Business income  |                      | otract Line b from                                 |               |   | \$ | 0.00     | \$ |          |
| 4 | Rents and other real property income. Subtract in the appropriate column(s) of Line 4. Do not ent any part of the operating expenses entered on L  a. Gross receipts b. Ordinary and necessary operating expenses   | er a ine \$          | number less than b as a deduction Debtor 0.00 0.00 | zere in 1     | o. Do not include<br>Part IV.<br>Spouse |    |          |    |          |
|   | c. Rent and other real property income  | Sυ                   | btract Line b fron                                 | n Li          | ne a                                    | \$ | 0.00     | \$ |          |
| 5 | Interest, dividends, and royalties.   |                      |  |               |   | \$ | 0.00     | \$ |          |
| 6 | Pension and retirement income.  |                      |  |               |   | \$ | 0.00     | \$ |          |
| 7 | Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by the debtor's spouse.  \$ 0.00 \$ |                      |  |               |   |    |          |    |          |
| 8 | Unemployment compensation. Enter the amount However, if you contend that unemployment comp benefit under the Social Security Act, do not list the or B, but instead state the amount in the space below Unemployment compensation claimed to be a benefit under the Social Security Act           | ensa<br>ne ai<br>ow: | ation received by y                                | you o         | or your spouse was a sation in Column A | ¢  | 0.00     | ¢  |          |

| 9  | Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Total and enter on Line 9. Do not include alimony or separate maintenance payments paid by your spouse, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.  Debtor Spouse  |   |           |
|----|---|---|-----------|
|    | a. Child Support \$ 628.00 \$   |   |           |
|    | b. \$ \$  | 628.00  | \$        |
| 10 | <b>Subtotal.</b> Add Lines 2 thru 9 in Column A, and, if Column B is completed, add Lines 2 through 9 in Column B. Enter the total(s).  | 4,335.48  | \$        |
| 11 | <b>Total.</b> If Column B has been completed, add Line 10, Column A to Line 10, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 10, Column A. \$  |   | 4,335.48  |
|    | Part II. CALCULATION OF § 1325(b)(4) COMMITMENT PER   | RIOD  |           |
| 12 | Enter the amount from Line 11   | \$  | 4,335.48  |
| 13 | Marital Adjustment. If you are married, but are not filing jointly with your spouse, AND if you contect calculation of the commitment period under § 1325(b)(4) does not require inclusion of the income of genter on Line 13 the amount of the income listed in Line 10, Column B that was NOT paid on a regulative household expenses of you or your dependents and specify, in the lines below, the basis for excludincome (such as payment of the spouse's tax liability or the spouse's support of persons other than the the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list addition adjustments on a separate page. If the conditions for entering this adjustment do not apply, enter zero a.    S | your spouse,<br>ar basis for<br>ding this<br>debtor or<br>nal |           |
|    |   | \$  | 0.00      |
| 14 | Subtract Line 13 from Line 12 and enter the result.   | \$  | 4,335.48  |
| 15 | <b>Annualized current monthly income for § 1325(b)(4).</b> Multiply the amount from Line 14 by the nu and enter the result.   | ımber 12<br>\$  | 52,025.76 |
| 16 | <b>Applicable median family income.</b> Enter the median family income for applicable state and househo (This information is available by family size at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankrupto   | cy court.)  |           |
|    | a. Enter debtor's state of residence: NC b. Enter debtor's household size:  | 4 \$  | 63,169.00 |
| 17 | <ul> <li>Application of § 1325(b)(4). Check the applicable box and proceed as directed.</li> <li>■ The amount on Line 15 is less than the amount on Line 16. Check the box for "The applicable the top of page 1 of this statement and continue with this statement.</li> <li>□ The amount on Line 15 is not less than the amount on Line 16. Check the box for "The application years" at the top of page 1 of this statement and continue with this statement.</li> </ul>   |   | ·         |
|    | Part III. APPLICATION OF § 1325(b)(3) FOR DETERMINING DISPOSABLE  | INCOME  |           |
| 18 | Enter the amount from Line 11.  | \$  | 4,335.48  |
| 19 | Marital Adjustment. If you are married, but are not filing jointly with your spouse, enter on Line 19 any income listed in Line 10, Column B that was NOT paid on a regular basis for the household experdebtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B incas payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustment separate page. If the conditions for entering this adjustment do not apply, enter zero.    a.  | nses of the<br>come(such<br>debtor's                          |           |
|    | Total and enter on Line 19.   | \$  | 0.00      |
| 20 | Current monthly income for § 1325(b)(3). Subtract Line 19 from Line 18 and enter the result.  | \$  | 4,335.48  |

| 21  | <b>Annualized current monthly income for § 1325(b)(3).</b> Multiply the amount from enter the result.  | Line 20 by the number 12 and | \$     | 52,025.76 |  |  |
|-----|--|------------------------------|--------|-----------|--|--|
| 22  | Applicable median family income. Enter the amount from Line 16.  |                              |        | 63,169.00 |  |  |
|     | Application of § 1325(b)(3). Check the applicable box and proceed as directed.   |                              | \$     | 00,100.00 |  |  |
| 23  | ☐ The amount on Line 21 is more than the amount on Line 22. Check the box f 1325(b)(3)" at the top of page 1 of this statement and complete the remaining page 1.  |                              | rmined | under §   |  |  |
|     | ■ The amount on Line 21 is not more than the amount on Line 22. Check the box for "Disposable income is § 1325(b)(3)" at the top of page 1 of this statement and complete Part VII of this statement. Do not complete  |                              |        |           |  |  |
|     | Part IV. CALCULATION OF DEDUCTIONS   | FROM INCOME                  |        |           |  |  |
|     | Subpart A: Deductions under Standards of the Internal F  | evenue Service (IRS)         |        |           |  |  |
| 24A | National Standards: food, apparel and services, housekeeping supplies, persona Enter in Line 24A the "Total" amount from IRS National Standards for Allowable L applicable household size. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or a bankruptcy court.)   | ving Expenses for the        | \$     |           |  |  |
| 24B | National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 16b.) Multiply Line a1 by Line b1 to obtain a total amount for household members of 55, and enter the result in Line c1.  Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 24B. |                              |        |           |  |  |
|     | Household members under 65 years of age Household members 65 y   | ears of age or older         |        |           |  |  |
|     | a1. Allowance per member a2. Allowance per member  | per                          |        |           |  |  |
|     | b1. Number of members b2. Number of members  |                              |        |           |  |  |
|     | c1. Subtotal c2. Subtotal  |                              | \$     |           |  |  |
| 25A | <b>Local Standards: housing and utilities; non-mortgage expenses.</b> Enter the amount Utilities Standards; non-mortgage expenses for the applicable county and household available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).   |                              | \$     |           |  |  |
| 25B | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 47; subtract Line b from Line a and enter the result in Line 25B. Do not enter an amount less than zero.    a.   IRS Housing and Utilities Standards; mortgage/rent Expense   \$   b.   Average Monthly Payment for any debts secured by your home, if any, as stated in Line 47   \$   |                              |        |           |  |  |
|     |  | b from Line a.               | \$     |           |  |  |
| 26  | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 25A and 25B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities   |                              |        |           |  |  |

|     | Local Standards: transportation; vehicle operation/public transpexpense allowance in this category regardless of whether you pay the regardless of whether you use public transportation.  |   |    |  |  |
|-----|--|---|----|--|--|
| 27A | Check the number of vehicles for which you pay the operating expenincluded as a contribution to your household expenses in Line 7.   |   |    |  |  |
|     | If you checked 0, enter on Line 27A the "Public Transportation" amo<br>Transportation. If you checked 1 or 2 or more, enter on Line 27A the<br>Standards: Transportation for the applicable number of vehicles in the<br>Census Region. (These amounts are available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a>  | e "Operating Costs" amount from IRS Local<br>ne applicable Metropolitan Statistical Area or | \$ |  |  |
| 27B | Local Standards: transportation; additional public transportation expenses for a vehicle and also use public transportation, and you condeduction for your public transportation expenses, enter on Line 27B the IRS Local Standards: Transportation. (This amount is available a bankruptcy court.)   | \$  |    |  |  |
|     | <b>Local Standards: transportation ownership/lease expense; Vehicle 1.</b> Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.) $\square$ 1 $\square$ 2 or more.  |   |    |  |  |
| 28  | Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 47; subtract Line b from Line a and enter the result in Line 28. <b>Do not enter an amount less than zero.</b>  |   |    |  |  |
|     | a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle   | \$  |    |  |  |
|     | b. 1, as stated in Line 47 c. Net ownership/lease expense for Vehicle 1  | \$ Subtract Line b from Line a.   | \$ |  |  |
| 29  | Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 28.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 47; subtract Line b from Line a and enter the result in Line 29. Do not enter an amount less than zero. |   |    |  |  |
|     | a. IRS Transportation Standards, Ownership Costs Average Monthly Payment for any debts secured by Vehicle  | \$  |    |  |  |
|     | b. 2, as stated in Line 47   | \$  |    |  |  |
|     | c. Net ownership/lease expense for Vehicle 2  Other Necessary Expenses: taxes. Enter the total average monthly   | Subtract Line b from Line a.  | \$ |  |  |
| 30  | federal, state, and local taxes, other than real estate and sales taxes, social security taxes, and Medicare taxes. <b>Do not include real estate</b>  | such as income taxes, self employment taxes,  | \$ |  |  |
| 31  | Other Necessary Expenses: mandatory deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  |   |    |  |  |
| 32  | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for   |   |    |  |  |
| 33  | Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to  |   |    |  |  |
| 34  | Other Necessary Expenses: education for employment or for a plenter the total average monthly amount that you actually expend for and for education that is required for a physically or mentally challer education providing similar services is available.   | education that is a condition of employment   | \$ |  |  |
| 35  | Other Necessary Expenses: childcare. Enter the total average mor childcare - such as baby-sitting, day care, nursery and preschool. Do   |   | \$ |  |  |
|     |  |   |    |  |  |

| 36 | Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 24B. Do not include payments for health insurance or health savings accounts listed in Line 39. |           |  |  |  |
|----|--|-----------|--|--|--|
| 37 | Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that actually pay for telecommunication services other than your basic home telephone and cell phone service pagers, call waiting, caller id, special long distance, or internet service-to the extent necessary for your he welfare or that of your dependents. Do not include any amount previously deducted.             | - such as |  |  |  |
| 38 | <b>Total Expenses Allowed under IRS Standards.</b> Enter the total of Lines 24 through 37.   | \$        |  |  |  |
|    | Subpart B: Additional Living Expense Deductions  |           |  |  |  |
|    | Note: Do not include any expenses that you have listed in Lines 24-3'  | 7         |  |  |  |
|    | <b>Health Insurance, Disability Insurance, and Health Savings Account Expenses.</b> List the monthly expin the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents   | penses    |  |  |  |
| 39 | a. Health Insurance \$   |           |  |  |  |
|    | b. Disability Insurance \$   |           |  |  |  |
|    | c. Health Savings Account \$   |           |  |  |  |
|    | Total and enter on Line 39   | \$        |  |  |  |
|    | If you do not actually expend this total amount, state your actual total average monthly expenditures in the space below:  \$  |           |  |  |  |
| 40 | 40 Continued contributions to the care of household or family members. Enter the total average actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 34.                        |           |  |  |  |
| 41 | Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incur to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  |           |  |  |  |
| 42 | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your  |           |  |  |  |
| 43 | Education expenses for dependent children under 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary  |           |  |  |  |
| 44 | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National  |           |  |  |  |
| 45 | Charitable contributions. Enter the amount reasonably necessary for you to expend each month on charic contributions in the form of cash or financial instruments to a charitable organization as defined in 26 U.S 170(c)(1)-(2). Do not include any amount in excess of 15% of your gross monthly income.  | table     |  |  |  |
| 46 | <b>Total Additional Expense Deductions under § 707(b).</b> Enter the total of Lines 39 through 45.   | \$        |  |  |  |

|  |  |   | Subpart C: Deductions for D  | ebt l                    | Payment  |   |    |
|--|--|---|--|--------------------------|--|---|----|
| 47   | own,<br>check<br>sched<br>case,  | list the name of creditor, ic<br>whether the payment included as contractually due to | laims. For each of your debts that is seculentify the property securing the debt, standes taxes or insurance. The Average Moo each Secured Creditor in the 60 months y, list additional entries on a separate page | te the<br>nthly<br>follo | Average Month Payment is the twing the filing of | ly Payment, and otal of all amounts of the bankruptcy |    |
|  | a.   | Name of Creditor  | Property Securing the Debt   | \$                       | Average<br>Monthly<br>Payment                    | Does payment include taxes or insurance               |    |
|  |  |   |  | Т                        | otal: Add Lines                                  | j   | \$ |
| 48   | Other payments on secured claims. If any of debts listed in Line 47 are secured by your primary residence, a motor vehicle, or other property necessary for your support or the support of your dependents, you may include in your deduction 1/60th of any amount (the "cure amount") that you must pay the creditor in addition to the payments listed in Line 47, in order to maintain possession of the property. The cure amount would include any sums in default that must be paid in order to avoid repossession or foreclosure. List and total any such amounts in the following chart. If necessary, list additional entries on a separate page. |   |  |                          |  |   |    |
|  | a.   | Name of Creditor  | Property Securing the Debt   |                          | \$   | he Cure Amount  |    |
|  |  |   |  |                          | ,  | Total: Add Lines                                      | \$ |
| 49   | prior  | ty tax, child support and al  | ity claims. Enter the total amount, divid imony claims, for which you were liable ions, such as those set out in Line 33.  |                          |  |   | \$ |
|  | Chap<br>resul  | oter 13 administrative expting administrative expense                                 | enses. Multiply the amount in Line a by  | the ar                   | mount in Line b,                                 | and enter the   |    |
| 50   | a.   |   | lly Chapter 13 plan payment.   | \$                       |  |   |    |
| 50   | b. Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)   |   |  |                          |  |   |    |
|  | c.   |   | istrative expense of Chapter 13 case   | To                       | otal: Multiply Li                                | nes a and b   | \$ |
| 51   | Total  | Deductions for Debt Pay   | ment. Enter the total of Lines 47 through  | h 50.                    |  |   | \$ |
|  |  |   | Subpart D: Total Deductions  | fron                     | n Income   |   |    |
| 52   | Total  | of all deductions from in   | <b>come.</b> Enter the total of Lines 38, 46, an   | d 51.                    |  |   | \$ |
|  |  | Part V. DETER   | MINATION OF DISPOSABLE   | INC                      | COME UND   | ER § 1325(b)(2)                                       |    |
| 53   | Total  | current monthly income  | Enter the amount from Line 20.   |                          |  |   | \$ |
| Support income. Enter the monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I, that you received in accordance with applicable nonbankruptcy |  |   |  | \$                       |  |   |    |
| 55   | wage   | s as contributions for qualit   | ns. Enter the monthly total of (a) all amore a retirement plans, as specified in § 54 as specified in § 362(b)(19).  |                          |  |   | \$ |
| 56   | Total of all deductions allowed under § 707(b)(2). Enter the amount from Line 52.  |   |  |                          |  |   |    |

|    | Deduction for special circumstances. If there are special circumstances that justify additional expenses for which there is no reasonable alternative, describe the special circumstances and the resulting expenses in lines ac below. If necessary, list additional entries on a separate page. Total the expenses and enter the total in Line 57. You must provide your case trustee with documentation of these expenses and you must provide a detailed explanation of the special circumstances that make such expense necessary and reasonable. |  |      |                                  |                |  |
|----|--|--|------|----------------------------------|----------------|--|
| 57 |  | Nature of special circumstances  | Amo  | ount of Expense                  |                |  |
|    | a.   |  | \$   |                                  |                |  |
|    | b.   |  | \$   |                                  |                |  |
|    | c.   |  | \$   |                                  |                |  |
|    |  |  | Tota | al: Add Lines                    | \$             |  |
| 58 | Total adjustments to determine disposable income. Add the amounts on Lines 54, 55, 56, and 57 and enter the result.  |  |      |                                  |                |  |
| 59 | 59 <b>Monthly Disposable Income Under § 1325(b)(2).</b> Subtract Line 58 from Line 53 and enter the result.  |  |      |                                  | \$             |  |
|    |  | Part VI. ADDITIONAL EXPEN  | SE ( | CLAIMS                           |                |  |
|    | welfa<br>707(t   | <b>r Expenses.</b> List and describe any monthly expenses, not otherwise starte of you and your family and that you contend should be an additional b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. ach item. Total the expenses. | dedu | action from your current monthly | income under § |  |
| 60 |  | Expense Description  |      | Monthly Amount                   |                |  |
|    | a.   |  |      | \$                               |                |  |
|    | b.   |  |      | \$                               |                |  |
|    | C.   |  |      | \$                               |                |  |
|    | d.   | Total: Add Lines a, b, c and d   |      | <b>\$</b><br>\$                  |                |  |
|    | 1  | Total. Add Effics a, b, c and d  |      | Ψ                                |                |  |

| Part VII. VERIFICATION |  |  |  |  |
|------------------------|--|--|--|--|
| 61                     | I declare under penaldebtors must sign.) Date: | y of perjury that the information pr August 28, 2008 |  | true and correct. (If this is a joint case, both  /s/ Christina Maria Carpenter Christina Maria Carpenter (Debtor) |

B7 (Official Form 7) (12/07)

## United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)

| In re | Christina Maria Carpenter |           | Case No. |    |
|-------|---------------------------|-----------|----------|----|
|       |                           | Debtor(s) | Chapter  | 13 |

## STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

## 1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT      | SOURCE                      |
|-------------|-----------------------------|
| \$18,028.20 | 2008 Harnett County Schools |
| \$41,539.26 | 2007 Harnett County Schools |
| \$31,704.74 | 2006 Harnett County Schools |

## 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

\$3,140.00 2008 Child Support

\$89,465.00 2007 Child Support/Riversource Life Insurance/Oppenheimer Funds

**Distribution/Charles Schwab** 

\$10,435.00 2006 Child Support/Alimony/Pension

#### 3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts*. List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESSDATES OFAMOUNT STILLOF CREDITORPAYMENTSAMOUNT PAIDOWINGPaid ordinary payments, in part,\$0.00\$0.00

on bills and loans.

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

DATES OF PAID OR

PAYMENTS/ VALUE OF AMOUNT STILL

NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None c

c. *All debtors*: List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND
RELATIONSHIP TO DEBTOR
DATE OF PAYMENT
AMOUNT PAID
OWING

## 4. Suits and administrative proceedings, executions, garnishments and attachments

None

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT
AND CASE NUMBER
NATURE OF PROCEEDING
Scott Edward Carpenter
vs.
Complaint for Absolute
Divorce
Divorce
Christina Maria Carpenter
District Court Div.

COURT OR AGENCY
AND LOCATION
DISPOSITION
Disprosition
Dispro

Christina Maria Carpente 07CvD617

2

None

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF **PROPERTY** 

#### 5. Repossessions, foreclosures and returns

None 

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER Wachovia Bank c/o Beckett & Lee Post Office Box 3001 Malvern, PA 19355

DATE OF REPOSSESSION. FORECLOSURE SALE, TRANSFER OR RETURN

08/03/08

DESCRIPTION AND VALUE OF **PROPERTY** 

2008 Bentley 200 Cruise 20' Aluminum Pontoon

3

**Roat** 

Value Taken: \$16,667.00

## 6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATE OF

NAME AND ADDRESS OF ASSIGNEE ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND LOCATION NAME AND ADDRESS

DESCRIPTION AND VALUE OF OF COURT DATE OF OF CUSTODIAN CASE TITLE & NUMBER ORDER

**PROPERTY** 

7. Gifts

None 

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF RELATIONSHIP TO DESCRIPTION AND DEBTOR, IF ANY PERSON OR ORGANIZATION DATE OF GIFT VALUE OF GIFT Money **United Way** None 05/07-07/08

Total Value Given: \$50.00 Unknown

Saint Elizabeth Ann Seton 09/07-05/08 None

700 Carnegie Drive Total Value Given: \$100.00 Fayetteville, NC 28311

#### 8. Losses

None

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY

DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

4

## 9. Payments related to debt counseling or bankruptcy

None 

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE The Law Offices of John T. Orcutt, PC 6616-203 Six Forks Road

Raleigh, NC 27615 **Hummingbird Credit Counseling** 3737 Glenwood Avenue Suite 100

DATE OF PAYMENT, AMOUNT OF MONEY NAME OF PAYOR IF OTHER OR DESCRIPTION AND VALUE THAN DEBTOR OF PROPERTY \$500.00

\$34.00

10. Other transfers

None 

Raleigh, NC 27612

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE.

RELATIONSHIP TO DEBTOR

Richard and Cary Clark

DATE 12/07

05/07

AND VALUE RECEIVED 1996 Hyundai Accent

DESCRIBE PROPERTY TRANSFERRED

Value Received: \$100.00

2004 Mercury Mountaineer

**Friends** 

Tom Smith Ford 945 North Main Street

Lillington, NC 27546

None

None

08/20/08

House & Land: 382 Asset Parkway

Value Received: \$0.00

\*QUIT CLAIMED PER DIVORCE DECREE\*

Value received: TRADE IN VALUE ONLY

**Ex Spouse** 

**Scott Carpenter** 

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST

IN PROPERTY

#### 11. Closed financial accounts

None 

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

Ameriprise Financial 70100 Ameriprise Financial Center Minneapolis, MN 55474

**Charles Schwab 101 Montgomery Street** 

**Charles Schwab 101 Montgomey Street** San Francisco, CA 94101

San Francisco, CA 94104

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER. AND AMOUNT OF FINAL BALANCE

**Retirement Portfolio** Acct. #: 156419731001 Final Balance: \$773.90

**IRA Rollover Account** Acct. #: 4067-5628 Final Balance: \$

**IRA Rollover Account** Acct. #: 4067-5628 Final Balance:

AMOUNT AND DATE OF SALE OR CLOSING

5

\$15, 886.12 02/08

\$5,684.45

\*MONEY USED TO PAY **BILLS AND BOYFRIENDS** 

**BILLS\*** 

04/10/08 \*MONEY USED TO PAY

**BILLS AND BOYFRIENDS BILLS\*** 

\$7,990.33 03/03/08

\*MONEY USED TO PAY **BILLS AND BOYFRIENDS** 

**BILLS\*** 

## 12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS DATE OF TRANSFER OR SURRENDER, IF ANY

## 13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER

DESCRIPTION AND VALUE OF **PROPERTY** 

LOCATION OF PROPERTY

#### 15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS 382 Asset Parkway Sanford, NC 27332 NAME USED
Christina M. Carpenter
Tina Carpenter

DATES OF OCCUPANCY

6

07/04-06/06

## 16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

NAME AND ADDRESS OF DATE OF ENVIRONMENTAL

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

NATURE OF BUSINESS

BEGINNING AND ENDING DATES

7

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

## 19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within two years immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None

c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

8

(Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the two inventories reported in a., above.

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY

DATE OF INVENTORY

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns,

controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NATURE AND PERCENTAGE

NAME AND ADDRESS

TITLE

OF STOCK OWNERSHIP

#### 22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME **ADDRESS** DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS TITLE DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

## 24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

#### NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

9

## DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

| Date | August 28, 2008 | Signature | /s/ Christina Maria Carpenter |  |
|------|-----------------|-----------|-------------------------------|--|
|      |                 |           | Christina Maria Carpenter     |  |
|      |                 |           | Debtor                        |  |

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

10

B6 Declaration (Official Form 6 - Declaration). (12/07)

# **United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)**

| In re | Christina Maria Carpenter                                 |  |   | Case No. |            |  |  |  |
|-------|---|--|---|----------|------------|--|--|--|
|       |   |  | Debtor(s)   | Chapter  | 13         |  |  |  |
|       | DECLARATION CON   | CERN   | ING DEBTOR'S SO   | CHEDULI  | E <b>S</b> |  |  |  |
|       | DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR |  |   |          |            |  |  |  |
|       |   | clare under penalty of perjury that I have read the foregoing summary and schedules, consisting of s, and that they are true and correct to the best of my knowledge, information, and belief. |   |          |            |  |  |  |
| Date  |   | nature   | /s/ Christina Maria Car<br>Christina Maria Carper<br>Debtor |          |            |  |  |  |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

North Carolina Department of Revenue c/o NC Department of Justice Post Office Box 629 Raleigh, NC 27602-0629

ChexSystems Attn: Consumer Relations 7805 Hudson Road, Ste. 100 Woodbury, MN 55125 First Citizens Bank Post Office Box 27131 Raleigh, NC 27611-7131

Employment Security Commission Attn: Benefit Payment Control Post Office Box 26504 Raleigh, NC 27611-6504 American General Finance 1915 Bragg Street Sanford, NC 27330-5854 Ford Motor Credit National Bankruptcy Service Center Post Office Box 537901 Livonia, MI 48153-7901

Credit Bureau Post Office Box 26140 Greensboro, NC 27402 David Anderson 6916 Inglenook Cove Apt. 1817 Midvale, UT 84047 Ford Motor Credit Company Post Office Box 55000 Drawer 55-953 Detroit, MI 48255-0953

NC Child Support Centralized Collections Post Office Box 900006 Raleigh, NC 27675-9006 Chatlee Sporting Goods 2615 Jefferson Davis Highway Sanford, NC 27330 Harnett County Tax Collector 305 West Cornelius Harnett Blvd. Suite 101

Lillington, NC 27546

Internal Revenue Service\*\* Post Office Box 21126 Philadelphia, PA 19114-0326

David Anderson 6916 Inglenook Cove Apt. 1817 Midvale, UT 84047 Hubert Vester Ford 213 Southeast Boulevard Clinton, NC 28328

Equifax Information Systems LLC P.O. Box 740241 Atlanta, GA 30374-0241 Edwards Music 524 McPherson Church Road Fayetteville, NC 28303 Internal Revenue Service Post Office Box 21126 Philadelphia, PA 19114-0326

Experian
P.O. Box 2002
Allen, TX 75013-2002

First Citizens Bank Attn: Patrice Sims Post Office Box 25187 Raleigh, NC 27611-5187 North Carolina Department of Rev c/o NC Department of Justice Post Office Box 629 Raleigh, NC 27602-0629

Innovis Data Solutions Attn: Consumer Assistance P.O. Box 1534 Columbus, OH 43216-1534 First Citizens Bank Attn: BC Nelson Post Office Box 28203 Raleigh, NC 27611-8203 North Carolina Department of Rev c/o Reginald S. Hinton Post Office Box 25000 Raleigh, NC 27640-5000

Trans Union Corporation P.O. Box 2000 Crum Lynne, PA 19022-2000 First Citizens Bank Post Office Box 1580 Roanoke, VA 24007-1580 North Carolina Dept of Revenue Post Office Box 1168 Raleigh, NC 27602-1168 Sams Club Post Office Box 981064 El Paso, TX 79998-1064 Tom Smith Ford 945 North Main Street Lillington, NC 27546

Sams Club Post Office Box 981401 El Paso, TX 79998-1401 US Furniture Outlet 409 Wilson Road Sanford, NC 27330

Security Force Inc. 4805 Green Road Suite 110 Raleigh, NC 27616 Wachovia Bank c/o Beckett & Lee Post Office Box 3001 Malvern, PA 19355

Sovereign Bank Post Office Box 12646 Reading, PA 19612-2646 Wachovia Dealer Services Post Office Box 25339 Santa Ana, CA 92799-5339

Sprint Post Office Box 7086 London, KY 40742-7086

Sprint Post Office Box 8077 London, KY 40742

SunTrust Mortgage, Inc. Customer Service Department Post Office Box 26149 Richmond, VA 23260-6149

The Law Offices of John T. Orcutt, 6616-203 Six Forks Road Raleigh, NC 27615

The Shed Depot 2700 South Horner Boulevard Sanford, NC 27332

# **United States Bankruptcy Court Eastern District of North Carolina (NC Exemptions)**

|                                 | —————————————————————————————————————— |  |                |                         |  |  |  |  |  |  |
|---------------------------------|--|--|----------------|-------------------------|--|--|--|--|--|--|
| In re                           | Christina Maria Carpenter              |  | Case No.       |                         |  |  |  |  |  |  |
|                                 |  | Debtor(s)  | Chapter        | 13                      |  |  |  |  |  |  |
|                                 |  |  |                |                         |  |  |  |  |  |  |
|                                 |  |  |                |                         |  |  |  |  |  |  |
| VERIFICATION OF CREDITOR MATRIX |  |  |                |                         |  |  |  |  |  |  |
|                                 | , _                                    |  |                |                         |  |  |  |  |  |  |
|                                 |  |  |                |                         |  |  |  |  |  |  |
|                                 |  |  |                |                         |  |  |  |  |  |  |
| The ab                          | ove-named Debtor hereby verifi         | fies that the attached list of creditors is true and corre | ect to the bes | t of his/her knowledge. |  |  |  |  |  |  |
|                                 |  |  |                |                         |  |  |  |  |  |  |
| D .                             | A                                      | /o/ Christina Maria Cormenter                              |                |                         |  |  |  |  |  |  |
| Date:                           | August 28, 2008                        | /s/ Christina Maria Carpenter                              |                |                         |  |  |  |  |  |  |

**Christina Maria Carpenter** 

Signature of Debtor